

Questions for Candidates Seeking Election for Council

(Feel free to use additional space when needed. It is recommended that all candidates read the Master Plan, but not necessary.)

- Why did you choose to live in Galena?

- Where do you see Galena in 5 years?

- What issues do you think are most relevant to the residents of Galena?

- What are your opinions on Development?

- Do you have any transferring skills as it relates to development, banking, law, etc.?

- What are your ideas for the look and feel of Galena?

- Please give an experience when you have had to work with someone with whom you did not agree, and how you were part of the solution.



Application for Council Election to Village of Galena Council

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Position Applied for: **Village of Galena Council Member**

Applicants are encouraged to provide additional information, including:

- Cover Letter: An Explanation of why you are seeking the position and what you feel you can accomplish if approved?
- Resume: Listing relevant certifications, affiliations, employment and educational experience.

Please list any Village or general government experience or Village volunteer history.

Have you ever worked for the Village of Galena? If yes, when and in what capacity? YES NO

Education

	From:	To:	Did you graduate?	Diploma:
High School			YES <input type="checkbox"/> NO <input type="checkbox"/>	
College			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Other			YES <input type="checkbox"/> NO <input type="checkbox"/>	

Please list three professional references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Current Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____
From: _____ To: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.
By signing this application, I agree to comply with the applicable state ethics laws and to ensure all functions of the board are held in accordance with the Ohio Sunshine Law. I shall make every effort to attend all meetings of the board faithfully through the tenure of my term or otherwise notify the Presiding Officer of the Council or Fiscal Officer of my expected absence prior to the meeting. I agree to serve in the best interest of the residents of Galena.

Signature: _____ Date: _____