



CITY CLERK'S OFFICE

110 N 1st Street, Indianola, IA 50125-0299 • www.indianolaiowa.gov
515-961-9410 phone • 515.961.9402 fax

MAYOR POSITION EXPRESSION OF INTEREST

PERSONAL INFORMATION

NAME:		TODAY'S DATE:	
STREET ADDRESS:			
CITY:		STATE:	
EMAIL:		ZIP:	
HOME PHONE:		CELL PHONE:	
WORK PHONE:		OCCUPATION:	
HAVE YOU PREVIOUSLY SERVED AS AN ELECTED OFFICIAL, HERE OR ELSEWHERE?		YEARS RESIDED IN INDIANOLA:	
OFFICE:		YEARS SERVED:	

Please provide an essay of no more than 500 words indicating:

- Why you desire to be Mayor of Indianola;
- Why you believe you are qualified for this position; and
- How you will contribute to keep Indianola moving forward in a positive way.

Please also attach a resume or bio that includes a listing of work experience and civic involvement.

Completed applications, with all required attachments, must be received by **5:00 p.m. on Wednesday, October 21, 2020**. All materials must be submitted to:

City Clerk's Office
110 N. 1st Street
Indianola, IA 50125

Or

CityClerk@indianolaiowa.gov

Applicants will be asked to make a presentation of 5 minutes or less during the City Council meeting at 6:00 p.m. on October 29, 2020.

Applicant's Statement

I certify that I am legally eligible for appointment to the office for which I am applying, including residency requirements. I agree, if appointed, to fairly and impartially, to the best of my ability, discharge all the duties of the office as required by law.

SIGNATURE

DATE