



**CITIZENS' ADVISORY COUNCIL
REQUEST FOR APPOINTMENT**

The LifeWays Board of Directors, following recommendations from the Citizens' Advisory Council Membership Committee, appoints interested citizens to serve on the Citizens' Advisory Councils of the Board. Persons who wish to represent the community and our consumers as a Citizens' Advisory Council member should complete the following information.

Name:	Address (include street, city, zip code):												
Phone (Day):	Phone (Evening):												
<p>Please indicate your preference to which appointment is requested (1 = desired; 2 = will consider; 0 = not interested).</p> <p><input type="checkbox"/> Citizens' Advisory Council for Adults with Mental Illness</p> <p><input type="checkbox"/> Citizens' Advisory Council for Persons with Developmental Disabilities</p> <p><input type="checkbox"/> Citizens' Advisory Council for Recipient Rights</p> <p><input type="checkbox"/> Citizens' Advisory Council for Research</p>													
<p>I am a (please check all that apply):</p> <p><input type="checkbox"/> Consumer or former consumer of services</p> <p><input type="checkbox"/> Family member of current or former consumer</p> <p><input type="checkbox"/> Representative of public interest</p> <p><input type="checkbox"/> Representative of consumer organization(s)/advocacy group(s)</p>													
<p>I am interested in becoming: <input type="checkbox"/> Voting Member <input type="checkbox"/> Non-Voting, Ex-Officio Member</p>													
<p>Community Activities, Consumer Organizations, Business Organization, Experience with Consumers:</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:40%; padding: 5px;">Activity/Organization</th> <th style="width:30%; padding: 5px;">Position(s) Held</th> <th style="width:30%; padding: 5px;">Length of Time</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">1. _____</td> <td style="padding: 5px;">_____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">2. _____</td> <td style="padding: 5px;">_____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">3. _____</td> <td style="padding: 5px;">_____</td> <td style="padding: 5px;">_____</td> </tr> </tbody> </table>		Activity/Organization	Position(s) Held	Length of Time	1. _____	_____	_____	2. _____	_____	_____	3. _____	_____	_____
Activity/Organization	Position(s) Held	Length of Time											
1. _____	_____	_____											
2. _____	_____	_____											
3. _____	_____	_____											

Employment

Current Employer: _____
Position: _____
Years: _____

Education

High School: _____
College: _____
Other: _____

Additional information you feel may be helpful to the Citizens' Advisory Council and the LifeWays Board in considering your appointment:

Please list three (3) references we may contact:

Name	Address	Phone

My signature authorizes my consent to contact the above named references and signifies my interest in serving on a Citizens' Advisory Council to the LifeWays Board.

Signature: _____

Date: _____

**Please submit completed application to: LifeWays, Customer Services
1200 N. West Avenue, Jackson, MI 49202**