

RED CLIFF BAND OF LAKE SUPERIOR CHIPPEWA INDIANS
COMMITTEE/BOARD APPLICATION FORM
88385 PIKE ROAD, HWY 13
BAYFIELD, WI 54814
715-779-3700

Name _____ Enrollment # _____

Address _____ Phone # _____

Committee _____

Do you have an immediate family member (i.e. father, mother, spouse/significant other, brother, sister, son, daughter) serving as a member on this committee? YES NO

If so, please specify: _____

Do you have an immediate family member who is employed under this program? YES NO

If so, please specify: _____

Do you have any experience working with this committee or with a program under this committee? YES NO

If so, please explain: _____

Why are you interested in serving on this committee? _____

Signature

Date