



Application for Council Membership

*Full Name:* \_\_\_\_\_ *Date:* \_\_\_\_\_  
*Last First*

\_\_\_\_\_  
*Street Address Apartment/Unit#*

\_\_\_\_\_  
*City State Zip Code*

\_\_\_\_\_  
*Phone: E-mail*

County of Residence: \_\_\_\_\_

How long have you lived in the NW8 Counties? \_\_\_\_\_

Occupation (If applicable): \_\_\_\_\_

Please state briefly why you are interested in serving on the NW8 Adult Mental health Local Advisory Council:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any special interests, education or training which you feel the Local Advisory Council could use?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Conflict of interest is defined as the participation in any activity, recommended action, or decision from which the individual has or could have the potential to receive personal gain, whether it be direct or indirect. In accordance with this definition, do you have any legal or equitable interest in any business, however organized, which could be construed as a conflict of interest?

Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, please provide details:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you currently serving on any other NW8 County Advisory Committee(s)/Board(s)? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, name of Committee/Board: \_\_\_\_\_

Serving Kittson, Mahnomen, Marshall, Norman, Pennington, Polk, Red Lake & Roseau Counties



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Are you related to any NW8 County Commissioners or any member on the NW8 Adult Local Advisory Council?

Yes \_\_\_\_\_ No \_\_\_\_\_

If so, give name and relationship: \_\_\_\_\_

Other qualifications, experience, information or comments you would like to submit.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SUBMIT COMPLETED APPLICATION TO YOUR LOCAL SOCIAL SERVICES OR IN PERSON AT THE NEXT LOCAL ADVISORY COUNCIL MEETING**

(GO TO [www.nw8amhi.org](http://www.nw8amhi.org) FOR MEETING DATES, TIMES & LOCATION)

**ATTENTION: NW8 ADULT LOCAL ADVISORY COUNCIL**

<b>Kittson County Social Services</b>	<b>410 5<sup>th</sup> Street S.</b>	<b>Hallock, MN</b>	<b>56738</b>
<b>Mahnomen County Social Services</b>	<b>311 North Main Street, PO Box 460</b>	<b>Mahnomen, MN</b>	<b>56557</b>
<b>Marshall County Social Services</b>	<b>208 East Colvin Avenue</b>	<b>Warren, MN</b>	<b>56762</b>
<b>Norman County Social Services</b>	<b>15 2<sup>nd</sup> Avenue NE</b>	<b>Ada, MN</b>	<b>56510</b>
<b>Pennington County Human Services</b>	<b>318 Knight Avenue, PO Box 340</b>	<b>Thief River Falls, MN</b>	<b>56701</b>
<b>Polk County Social Services</b>	<b>612 North Broadway, Suite 302</b>	<b>Crookston, MN</b>	<b>56716</b>
<b>Red Lake County Social Services</b>	<b>125 Edward Avenue SW</b>	<b>Red Lake Falls, MN</b>	<b>56750</b>
<b>Roseau County Social Services</b>	<b>208 6<sup>th</sup> Street SW</b>	<b>Roseau, MN</b>	<b>56751</b>

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Received Date: \_\_\_\_\_ Reviewed by Council: \_\_\_\_\_

Council Membership:

Approved \_\_\_\_\_ Denied \_\_\_\_\_

Explanation if Denied: \_\_\_\_\_  
\_\_\_\_\_