City of Fort Atkinson
City Manager's Office
101 N. Main Street
Fort Atkinson, WI 53538

CITIZEN SERVICE INFORMATION FORM

Name (Print): _____ **Date:** _____
Last *First* *Middle*

Home Address: _____

Business Name/Address: _____

Telephone (Home): _____ **(Work)**: _____

Email Address: _____

How long have you lived in the City of Fort Atkinson? _____

Which Boards, Commissions and/or Committees interest you? _____
_____

Please give a brief overview of your background, experience, interest or concerns in the above areas:

References:

1. _____ **Phone:** _____

2. _____ **Phone:**_____

_____
Signature

Return this form to:
City Manager's Office
101 North Main Street
Fort Atkinson WI 53538
sweihert@fortatkinsonwi.gov