

**BIOGRAPHICAL QUESTIONNAIRE  
2018-2019**

Please fill out this questionnaire for the MACo office. The questionnaire will be used to advise the President if you wish to be appointed to a MACo committee. In addition, we might use the information you provide as background for news releases whenever you are appointed to serve on a committee.

NAME: \_\_\_\_\_ TODAY'S DATE: \_\_\_\_\_

COUNTY: \_\_\_\_\_ POLITICAL PARTY: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

HOME PHONE #: \_\_\_\_\_ CELL PHONE #: \_\_\_\_\_

COUNTY E-MAIL ADDRESS: \_\_\_\_\_

HOME E-MAIL ADDRESS: \_\_\_\_\_

DATE YOU TOOK OFFICE: \_\_\_\_\_

PREVIOUS PUBLIC OFFICES HELD, AND DATES: \_\_\_\_\_

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

COMMITTEE INTEREST: PLEASE INDICATE YOUR TOP FIVE IN ORDER OF PREFERENCE:

- |  |                                 |
|--|---------------------------------|
| _____ AGRICULTURE                                  | _____ LAND USE & DEVELOPMENT    |
| _____ COMMUNITY, ECONOMIC DEVELOPMENT<br>AND LABOR | _____ PUBLIC LANDS              |
| _____ CONFERENCE PLANNING                          | _____ RESOLUTIONS & LEGISLATIVE |
| _____ ENERGY                                       | _____ TAX, BUDGET & FINANCE     |
| _____ HEALTH & HUMAN SERVICES                      | _____ TRANSPORTATION            |
| _____ JUSTICE & PUBLIC SAFETY                      |                                 |

WHAT EXPERIENCE PAST OR PRESENT WOULD YOU BRING TO THIS COMMITTEE:

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

YOUR OCCUPATION: \_\_\_\_\_ EDUCATION: \_\_\_\_\_

ARE YOU WILLING TO HELP WITH LEGISLATIVE LOBBYING IN HELENA? \_\_\_\_ YES \_\_\_\_ NO

ADD ANY ADDITIONAL BIOGRAPHICAL INFORMATION YOU THINK MIGHT BE RELEVANT TO COMMUNITY INVOLVEMENT, EDUCATION, MEMBERSHIP IN ORGANIZATIONS, ETC.

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