



Application for Belton City Councilmember Vacancy

Contact Information

Name	
Street Address	Belton, MO 64012
Phone Number	()
Cell Number	()
Email Address	
Date of Birth	
Ward	

Education, Training, and Experience

Please summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities which would be of benefit for the position of City Councilmember. (Attach additional pages if necessary.)

Please describe your desire to serve in the position of City Councilmember. (Attach additional pages if necessary.)

Qualifications

Please indicate Yes or No

Are you at least 18 years of age?	Yes / No
Are you a citizen of the United States of America?	Yes / No
Are you a registered voter of your respective ward?	Yes / No
Have you been a resident of the City of Belton for a minimum of two (2) years?	Yes / No
Have you been a resident of your respective ward for a minimum of six (6) months?	Yes / No
Are you delinquent in the payment of any state or city taxes or municipal user fees (required to file Missouri form 5120)?	Yes / No
Have you been found guilty of or pled guilty to a felony or misdemeanor under the federal laws of the United States of America or to a felony under the laws of this state or an offense committed in another state that would be considered a felony in this state?	Yes / No
Do you hold any compensated elected governmental office?	Yes / No
Are you employed by the City of Belton?	Yes / No
Are you a past or present corporate officer of any fee office that owes any taxes to the state, other than those taxes which may be in dispute?	Yes / No
Do you have any outstanding campaign disclosure reports due from any prior elections?	Yes / No

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I affirm that I am eligible for this office, and I possess all of the requisite qualifications established for such office by the Statutes of Missouri and the Charter and Ordinances of the City of Belton to hold such position. I understand that if I am appointed to the position of City Councilmember, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate removal of office.

Printed Name

Signature

Date

Questions? Please contact the City Clerk at 816.331.4331.

Applications can be mailed to Belton City Hall, Attn: City Clerk, 520 Main St, Belton MO 64012 or emailed to admin@belton.org.