

**CITY OF HOUGHTON**

**P.O. Box 606**

**Houghton, MI 49931**

**(906) 482-1700**

**Application for Open City Council Seat**

**For term that expires November 3, 2026**

*Resumes are encouraged and may be attached to your **completed** application.*

**APPLICATION DUE DATE: Wednesday, March 18, 2026 at 4:00 p.m. EST**

**Name:**

**Home Address:**

**Work Address:**

**Home Phone:**

**Work Phone:**

**Cell Phone:**

**Email:**

Please note your preferred method(s) to be contacted: Home Phone Work Phone Cell Phone  
Email

Residency is required.

I am a resident. If so, for how many years? \_\_\_\_\_

**Describe any experiences that led to your desire to serve the community.**

**Provide a brief biography including your skills, background and expertise, as well as involvement in the community, professional or other nonprofit organizations that are specifically applicable to this board or commission.**

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**Employment:** List your three most recent employment experiences.

Dates of Employment	Company Name/Location	Position	Job Description

**Education:** List your most recent educational experiences.

Educational Institution/School	Certificate/Degree Received	Area(s) of Study

**Important Public Records Information:** All information submitted in this application is public information and subject to disclosure in response to a public records request made pursuant to the Freedom of Information Act. Please contact the Clerk at 906-482-1700 if you have any questions or concerns about the disclosure of specific information.

**Truth and Accuracy:** I certify that the information contained on this form is accurate and complete to the best of my knowledge. I understand that all information disclosed on this form will be available to the public as part of a Freedom of Information Act request.

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

Return completed forms to:

Eric Waara, City Manager  
 City of Houghton  
 P.O. Box 606, Houghton, MI 49931  
 eric@cityofhoughton.co