

**APPLICATION**

**KING COUNTY FIRE PROTECTION  
DISTRICT 10 COMMISSIONER**



NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

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

PRIMARY PHONE: \_\_\_\_\_

CITY/ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

ARE YOU A DISTRICT RESIDENT?  YES  NO    HOW LONG? \_\_\_\_\_    REGISTERED VOTER?  YES  NO  
(NOTE: A District resident resides within the boundaries of the Fire Protection District)

NAME/ADDRESS OF EMPLOYER: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

EDUCATIONAL BACKGROUND (including year graduated and Degrees): \_\_\_\_\_

PROFESSIONAL EXPERIENCE: \_\_\_\_\_

ORGANIZATIONAL AFFILIATIONS: \_\_\_\_\_

WHY ARE YOU SEEKING APPOINTMENT? \_\_\_\_\_

GENERAL REMARKS: \_\_\_\_\_

**Please return completed application to:**

King County Fire Protection District 10  
ATTN: Board Secretary  
175 Newport Way NW  
Issaquah, WA 98027  
Phone: (425) 313-3228  
Email: [jformisano@esf-r.org](mailto:jformisano@esf-r.org)

\_\_\_\_\_  
Applicant Signature