



15 N. Oakwood Road  
Oshkosh, WI 54904  
(920) 235-3789

## Board of Review Application

Name (first and last): \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ home \_\_\_\_\_ work

Email: \_\_\_\_\_

Place of employment (name and address): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe your experience with house assessments, assessors, or local government:

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

Briefly explain why you would like to serve on the Board of Review:

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

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_