



## CITY OF NEW CARLISLE NOTICE OF COUNCIL VACANCY

Notice is hereby given that the Council of the City of New Carlisle has a city council member vacancy and has a need to appoint one new council member. The eligibility of a new council member is as follows, as described in the New Carlisle Charter, Section 4.02 and Section 4.08(D).

### **SECTION 4.02:**

EACH MEMBER OF COUNCIL AT THE TIME OF NOMINATION, ELECTION AND THROUGHOUT THE TERM OF OFFICE SHALL BE A REGISTERED VOTER IN AND A RESIDENT OF THE CITY. THE COUNCIL SHALL BE THE SOLE JUDGE OF THE ELIGIBILITY OF ITS MEMBERS AS REQUIRED BY THIS SECTION.

### **SECTION 4.08(D):**

WHENEVER THE OFFICE OF A COUNCIL MEMBER BECOMES VACANT, COUNCIL SHALL PROVIDE TIMELY NOTICE OF SUCH VACANCY AT THE NEXT REGULAR COUNCIL MEETING, AND THROUGH USE OF PUBLIC MEDIA. SUCH A VACANCY SHALL BE FILLED FOR THE REMAINDER OF THE UNEXPIRED TERM. COUNCIL SHALL, BY A MAJORITY VOTE OF ALL ITS REMAINING MEMBERS, NO SOONER THAN TEN (10) DAYS FOLLOWING THE PUBLICATION OF THE NOTICE OF THE VACANCY, APPOINT A QUALIFIED PERSON TO FILL THE VACANCY FOR THE REMAINDER OF THE TERM OF THE COUNCIL PERSON HE/SHE IS REPLACING. EACH COUNCIL MEMBER SO ELECTED SHALL HOLD OFFICE UNTIL THE END OF THE ORIGINAL TERM.

Pay is \$400.00 per month. City Council meetings are held on the 1<sup>st</sup> and 3<sup>rd</sup> Mondays monthly, with additional meetings scheduled as needed.

Any citizen of interest shall be required to complete an application for council, available after this page, on the city website, and in the foyer of the city building, 331 Church St.

Applications can be emailed to [hr@newcarlisleohio.gov](mailto:hr@newcarlisleohio.gov) or dropped off/mailed to the city building located at 331 S. Church St., New Carlisle, Ohio 45344.

The deadline for completed applications is 8/15/24 by 4:00 pm.



# APPLICATION FOR CITY COUNCIL

Please return application to the City Offices at 331 South Church Street or submit via email to [hr@newcarlisleohio.gov](mailto:hr@newcarlisleohio.gov)

## I. Resident Qualifier Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_, New Carlisle, Ohio 45344

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Are you a resident of New Carlisle?    **Yes**     **No**

Are you qualified to be a registered voter in New Carlisle?    **Yes**     **No**

## II. Additional Resident Information

Are you currently, or in the past, served on any other community boards, councils, or committees?

**Yes**     **No**

If yes, please list: \_\_\_\_\_

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

Have you been involved in any community activities or events?

**Yes**     **No**

If yes, please list: \_\_\_\_\_

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

Why do you want to serve on City Council?

Include any experience, traits or skills which may contribute to the Council and the greater good of the City.

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

If you need additional space, please use the back of this page or submit an additional sheet that has your name on it