



**TWO
RIVERS**
WISCONSIN

Committee Volunteer Application

If you reside in the City of Two Rivers and wish to be appointed to a citizens Committee, Commission, or Board please complete the following application and return to the City Manager's Office, P.O. Box 87, Two Rivers, WI, 54241-0087

Name (Last, First, Middle): Yungerman Bruce Thomas
Home Address: 1605 Jackson St
Phone: 608 295 6355 Email: byungerman@gmail.com
Employer/Business: Retired
Employer Address: N/A
Occupation: N/A

Which Committee, Commission, or Board do you wish to serve on?

Aging

Do you have any special skills, knowledge, experience, or interest that relates to the above Committee, Commission, or Board?

Interest in helping in the community

Do you have any conflict of interest related to the Committee, Commission, or Board for which you are applying (such as employed relatives, business or financial conflicts, etc.)?

No

Bruce Yungerman
Signature

11-21-25
Date



www.two-rivers.org



920.793.5564



920.793.5512



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**INFORMATION RELEASE AUTHORIZATION
CITY OF TWO RIVERS**

www.two-rivers.org

Thank you for applying for employment with the City of Two Rivers.

Instructions to Applicant: Complete this release and return to the City of Two Rivers. The Two Rivers Police Department requests this information to complete the employment background verification. The information obtained is used exclusively for the purpose of employment consideration. Failure to complete will result in delayed processing of your application.

APPLICANT INFORMATION					
Last Name	Yungerman	First	Bruce	M.I.	T
Street Address	1605 Jackson St				
City	Two Rivers	State	WI	ZIP	54241
Phone	608 295 6355	Former Name (If Applicable)			
Date of Birth	11/08/1957				

AUTHORIZATION

I authorize any official representative of the City of Two Rivers bearing or presenting this release, to obtain information and records pertaining to me and my personal background whether such information and records are public, private, favorable, unfavorable, or confidential in nature from any or all of the following sources:

1. Military Record Centers
2. Any place of business
3. Any Court, Police Agency or other location where criminal and misdemeanor records are kept
4. Former Employer(s)
5. Present Employer(s)
6. Any School, College, University or other educational institution including peace officer records
7. Credit Bureau(s)
8. Any Banking Institution
9. Any Local, State, or Federal Governmental Agency
10. Any private citizen who has knowledge of individual
11. Any social media accounts

I understand that any information obtained by the personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the City of Two Rivers. I fully understand that the refusal to grant this authorization will not, of itself, constitute a basis for rejection of my application. I hereby release any individual or institution, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, including actions brought under s. 895.50, Wisconsin Statutes (the Privacy Act) which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information or any attempt to comply with it.

Exceptions to this blanket authorization:

1. _____
2. _____
3. _____
4. _____

Signature:	Bruce Yungerman	Date:	11-04-25
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