

## **CITY MANAGER'S OFFICE**

3225 Main Street Sweet Home, OR 97386 Phone: 541-367-8969

Fax: 541-367-1215

Email: cpretty@sweethomeor.gov

## **BOARD/COMMITTEE/COMMISSION APPLICATION**

## Applicant Information (Please type/print clearly): Name:\_\_\_\_\_ Permanent Address: Mailing Address: Phone Number: E-Mail Address: Preferred method of contact: Mail Phone Email Occupation: Employer: Please mark the Board, Commission, or Committee on which you are interested in serving: Library Board **Budget Committee** Planning Commission Traffic Safety Committee Park and Tree Committee **Charter Review Committee** All Hazard Mitigation Committee Community Health Committee Are you applying for reappointment? If yes, how long have you served in this capacity: Year(s) \_\_\_\_Month(s) 1. How long have you lived in the area:\_\_\_\_\_Year(s) \_\_\_\_\_Month(s) 2. Please give a brief description of your experiences or training that you feel qualifies you for this particular position. 3. List current involvement in other community groups and/or activities.

4. What special contribution do you feel you can make to the group/position you are applying for?

RESIDENCY:	
The following applies for appointments that require residency and elector status:	
I,,certify corporate limits of the City of Sweet Home and am an experience 246.012(5). I further acknowledge that should either my change I will notify the City of Sweet Home immediately	y residency or my eligibility as an elector
CRIMINAL HISTORY BACKGROUND CHECK (CHC)	<b>)</b> :
A Criminal History Check (CHC) may be performed as appointment process for City Boards, Committees, and refusal to allow the CHC to be performed, when require longer be considered.	Commissions. I acknowledge that a
PUBLIC DISCLOSURE:	
The City sometimes receives requests for contact infor boards, commissions and committees. As an appointed of Sweet Home, the information provided on this application.	d public body volunteer serving the City
My signature acknowledges that the information I have complete to the best of my knowledge and I understanged required, and that the information provided on this app	d that a CHC may be performed, when
Signature	Date of Signature

Application for City Boards, Commissions & Committees Page 2 of 2