Application for a City of Springfield Citizen Advisory Board/Commission/Committee

City Manager's Office • 225 Fifth Street • Springfield, OR 97477

PLEASE NOTE:

- **When possible, council will not appoint people currently serving on another governing body to the Planning Commission or Budget Committee.**
- **When appointing people to any of the other city boards, commissions or committees, the Council shall take into account whether that person is being reappointed for a subsequent term, is currently serving on another governing body or currently appointed to another city board, commission or committee.**
- **When possible, the Council will appoint people to serve on one City board, commission or committee only.**

Board / Commission / Committee applying for:

_____

(A separate application must be completed for each board / commission / committee)

Name: _____
First Middle Initial Last

Home address: _____
Street City Zip

Mailing address: _____
Street City Zip

Day Phone: _____ Evening phone: _____

Email Address: _____

Preferred Form of Contact: _

Do you live within the Springfield city limits? ☐ Yes ☐ No ⇨ If yes, how long?_____
If no, do you live inside Springfield's Urban Growth Boundary? ☐ Yes ☐ No

Ward number (City residents only): _____

Are you a Springfield property owner? ☐ Yes ☐ No
Are you a Springfield business owner? ☐ Yes ☐ No
Are you a registered voter? ☐ Yes ☐ No

Occupation:_____ Place of employment/School:_____

_____

Business address:_____

Education:_____

Are you currently serving on any other board, committee, or commission? If so, please list them here:

_____

How did you hear about the above vacancy?

☐ Newspaper ad ☐ Newspaper article ☐ Radio/TV ☐ Mail notice

☐ Word of mouth ☐ Board/Commission/Committee member ☐ Internet

(Over, please)

For more information please call the City Manager's Office 541.726.3700
Return this application to the City Manager's Office, 225 Fifth Street, Springfield Oregon 97477

Printed on Recycled Paper

Application for a City of Springfield Citizen Advisory Board/Commission/Committee

Please print or type:

1. What experiences / training / qualifications do you have for this particular board / commission / committee?

2. What specific contribution do you hope to make?

3. Briefly describe your involvement in relevant community groups and activities. (Lack of previous involvement will not necessarily disqualify you from consideration.)

4. What community topics concern you that relate to this board / commission / committee? Why do you want to become a member?

5. Most boards / commissions / committees meet monthly. Subcommittees may meet more frequently. Meetings generally last one and one-half hours. **It is highly recommended you attend a meeting before submitting the application.** Please read the news release for this position which contains the normal dates and times for these meetings and can be found at www.ci.springfield.or.us/CMO/newsrel.htm. Are you available to attend meetings on the dates listed for this committee?

   ☐ Yes ☐ No

   Comments:_____

   _____

   _____

I certify the information in this application and attachments are true and complete to the best of my knowledge. I understand that false or misleading statements or missing information is cause for rejection of application, removal of name from eligible list, or dismissal from the position. I hereby waive my rights to claims or damages against any employer and the City of Springfield, its officers, agents, and employees, in regard to this exchange of information. I hereby authorize to permit the City of Springfield and/or the Springfield Police Department to review my background information and if required my DMV records. I have reviewed the Advisory and meet the minimum requirements to serve/volunteer in the desired position. I also authorize to permit any materials listed above to be copied and retained by the City of Springfield. I authorize the use of my photograph.

I will defend, indemnify and hold harmless the City of Springfield, its officers, employees, and agents from and against all liability or loss and against any and all claims, actions, causes of actions, proceedings or appeals based upon or arising out of or arising from or in connection with my conduct or performance as a volunteer with the City of Springfield including but not limited damage or injury to persons or property and including without limitation attorney fees and expenses; except for losses, claims or actions resulting from the sole negligence of the City of Springfield.

Applicant Signature:_____Date:_____

For more information please call the City Manager's Office 541.726.3700
Return this application to the City Manager's Office, 225 Fifth Street, Springfield Oregon 97477

Printed on Recycled Paper