

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.

(A separate application must be completed	for each board /	commissi	on / committee)		
Name:					
First	Midd	le Initial		Last	
Home address:					
Street		City		Zip	
Mailing address:					_
Street		City		Zip	
Day Phone:		Evenir	g phone:		
Email Address:					
Preferred Form of Contact:					
Do you live within the Springfield city lim	its? Yes		If yes, how long?		
	No	~~	If no, do you live	nside Springfield's	_
Walanda (Cirani lara)			Urban Growth Bo	•	
Ward number (City residents only):			Yes	No	
Are you a Springfield property owner?	Yes	No			
Are you a Springfield business owner?	Yes	No			
Are you a registered voter?	Yes	No			
Occupation:	Plac	e of emplo	oyment/School:		
					<u></u>
Business address:					_
Education:					
Are you currently serving on any other box	ard, committee, o	r commiss	ion? If so, please list	them here:	
How did you hear about the above vacanc	y?				
Newspaper ad Newsp	paper article		Radio/TV	Mail notice	
Word of mouth Board	Word of mouth Board/Commission/Committee member		ember	Internet	
					(Ov

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



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

 Briefly describe your involvement in relevant community groups and activities. (Lack of previous involvement will not necessarily disqualify you from consideration.) What community topics concern you that relate to this board / commission / committee? Why do you want to become a member? 		ease print or type: What experiences / training / qualifications do you have for this particular board / commission / committee?
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 https://www.springfield-or.gov/city/newsroom/. 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 bereby waive my rights to claims or damages against any employer and the City of Springfield. Springfield, is and employees, in regard to this exchange of information. I bereby authorize to permit the City of Springfield and/or the Springfield Police Department to review my background information and if required my DMY records. I have reviewed the Advisory and meet the minimum requirements to serviewouther on 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 bold harmless the City of Springfield, its officers, employees, 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 sepants counciled to the city of Springfield. Applicant Signature:	2.	What specific contribution do you hope to make?
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