



APPLICATION FOR SERVICE ON BOARD OR COMMISSION

Thank you for your interest in serving your community. The information on this form will help the Mayor and City Council learn about the background of persons interested in serving on a particular board or commission.

Name: _____ Phone (Home) _____
Address: _____ Phone (cell) _____
_____ Phone (work) _____
Email: _____

Board or commission for which you are an applicant::

<input type="checkbox"/> Advisory Board	<input type="checkbox"/> Historic Landmark Committee
<input type="checkbox"/> Airport Commission	<input type="checkbox"/> Landscape Review Committee
<input type="checkbox"/> Board of Appeals	<input type="checkbox"/> McMinnville Urban Area Management Commission (MUAMC)
<input type="checkbox"/> Budget Committee	<input type="checkbox"/> Planning Commission
<input type="checkbox"/> Citizens' Advisory Committee	

Ward in which you reside (if applicable): _____

How many years have you lived in McMinnville? _____
Educational and occupational background: _____

Why are you interested in serving? _____

Date _____ Signed _____

Please return to City Hall, 230 NE Second Street, McMinnville, OR 97128