



# Application for Committees/Commission

## Contact Information

|                      |  |
|----------------------|--|
| Name:                |  |
| Street Address:      |  |
| Mailing Address:     |  |
| City/State/Zip Code: |  |
| Home Phone:          |  |
| Work Phone:          |  |
| E-Mail Address:      |  |

## Background

|                                 |  |
|---------------------------------|--|
| Years of Residence in Fairview: |  |
| Place of Employment:            |  |
| Occupation:                     |  |
| Educational Background:         |  |
| Prior Civic Activities:         |  |

## Boards/Commissions of Interest

Please check all of the following Boards/Commissions that interest you:

If checking more than one, please prioritize your interest (1, 2, 3, etc.)

**Budget Committee**

**Planning Commission**

**Community Engagement Committee (CEC)**

**Economic Development Advisory Committee (EDAC)**

**Parks and Recreation Advisory Committee (PRAC)**

**Public Safety Advisory Committee (PSAC)**

**Urban Renewal Planning Committee**

### Special Skills or Qualifications

Summarize any special training, skills or experience you may have pertinent to the Board/Commission to which you are applying.

### Motivation

Discuss your motivation for serving on this Board/Commission.

### Special Notice

Please be advised that members of the City Council and Planning Commission are required to file an annual **Statement of Economic Interest** with the State of Oregon. A sample reporting form is available from the Administration Office at Fairview City Hall indicating the type of information you will be required to disclose if you are appointed. Applicants may be subject to a background check pursuant to Chapter 2.45 of the Fairview Municipal Code

### Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

|                |  |
|----------------|--|
| Name (printed) |  |
| Signature      |  |
| Date           |  |

Applications expire December 31 of the calendar year in which submitted.

### Our Policy

It is the policy of the City of Fairview to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. The City of Fairview accepts applications from potential board/commission members throughout the year and will hold applications until vacancies exist on specific boards/commissions.

Thank you for completing this application form and for your interest in volunteering with us.