



CITY OF BROOKS

COMMISSIONS AND BOARDS APPLICATION FORM

APPLICATION FOR: _____
(name of Board, Committee, Commission)

NAME: _____

ADDRESS: _____

PHONE NO:

- RES: _____
- BUS: _____
- FAX: _____
- E-mail: _____

OCCUPATION OR BACKGROUND INFORMATION

WHAT SKILLS AND STRENGTHS WILL YOU BRING TO THIS POSITION?

PLEASE LIST ANY PREVIOUS INVOLVEMENT YOU'VE HAD WITH THIS COMMISSION, BOARD OR COMMITTEE:



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LIST ALL PREVIOUS EXPERIENCE ON BOARDS, COMMISSIONS OR VOLUNTEER POSITIONS:

ARE YOU CURRENTLY SERVING ON A BOARD OR COMMISSION? YES NO
IF YES, PLEASE STATE WHICH BOARD OR COMMISSION.

OTHER COMMENTS AND INFORMATION YOU WOULD LIKE TO PROVIDE:

HOW LONG HAVE YOU LIVED IN BROOKS? _____

**IF YOU ARE CURRENTLY SERVING ON TWO
BOARDS OR COMMISSIONS, YOU ARE NOT
ELIGIBLE TO APPLY FOR A THIRD
APPOINTMENT.**

REFERENCES:

1. Name: _____ Phone: _____

2. Name: _____ Phone: _____
