

**APPLICATION FOR APPOINTMENT TO COMMISSION, COMMITTEE OR TASK FORCE**

*\*\*If you do not wish to have any specific information in this form given out to the general public, please let us know, in writing, and tell us the reason why. We will try to honor your request within the constraints of the applicable public records law\*\**

I am interested in serving as a member of the \_\_\_\_\_

Name \_\_\_\_\_

Mailing address \_\_\_\_\_

Residence address if different from above \_\_\_\_\_

Home telephone \_\_\_\_\_ Work telephone \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_

Current employment \_\_\_\_\_

Your area of interest \_\_\_\_\_

Your area of expertise \_\_\_\_\_

Why do you want to serve? \_\_\_\_\_

Previous service in this appointed position or a similar position \_\_\_\_\_

Other volunteer activities \_\_\_\_\_

**Does your schedule allow you to attend;**

Daytime Meetings  yes no Evening meetings yes no

Does your schedule limit the days you could attend meetings? yes no

Have you ever been convicted of a crime?  yes no If Yes, please explain

Additional comments \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

Please return to:

City of Port Orford  
P.O. Box 310  
Port Orford, Oregon 97465

Phone: 541-332-3681