

Application for Appointment to

		_
(Committee or Pla	nning Commission)	

## **PLEASE PRINT**

Name				
	Last	First		
Home Address				
	Street	City		Zip
Occupation				ployment
			Place of Em	ployment
Business Address	·			
Phone No		Cell Phone I	No	
E-mail				
1. Do you reside	within the Vernonia	city limits?	Yes	No
2. Are you a regi	istered voter?		Yes	No
3. How did you le	earn about this vaca	ncy?		
Newspaper Notice in th		Word of Mouth Other (Specify)		_ _
	eetings a month or m be able to attend the		s significant tim	ne reading agenda
	mportant for commit endance rate of each	and the second of the second o		meet the goal of a
	nce/training do you l		ou for this pa	nticular appointment

7. Please give a brief description of your involvement in community groups and activities.
4. Please list community topics of particular concern to you that relate to this appointment.
5. Please list your reasons for wishing to be appointed.
Return completed application to City Hall, 1001 Bridge Street, Vernonia, OR 97064. Applications accepted until positions are filled. Immediate application recommended.
If applicable, you will be advised when the City Council or Planning Commission will conduct interviews of the applicants. The Planning Commission will make a recommendation to the Council. Plan to be present to discuss your application with the Council or Planning Commission. The Council will endeavor to make its selection at that meeting; however, it may wish to take more time to deliberate before making the appointment.
Information on this form is public information.  Thank you for your expression of interest in serving the community.
Signature of Applicant Date