

## **APPLICATION FOR BOARD SERVICE**

□ ANDREWS ECONOMIC DEVELOPMENT BOARD□ PLANNING & ZONING COMMISSSION

## QUALIFICATIONS FOR ECONOMIC DEVELOPMENT BOARD

- A resident of Andrews County
- Familiar with the development of a business plan or general financial operations of a business
- A registered voter
- Not an adversary party to pending litigation against the City
- Not in arrears on any city taxes, utility charges or other obligations owed the City of Andrews or other public entities within Andrews County

## **QUALIFICATION FOR PLANNING & ZONING COMMISSION**

- A resident of the City of Andrews
- A general knowledge of building construction is preferred but not required
- Community-minded visionary
- A registered voter
- Not an adversary party to pending litigation against the City
- Not in arrears on any city taxes, utility charges or other obligations owed the City of Andrews or other public entities within Andrews County

NAME:	
HOME ADDRESS:	
EMAIL:	PHONE (DAYTIME):
OCCUPATION:	(IF RETIRED, PLEASE INDICATE FORMER OCCUPATION)
EMPLOYER:	
HOW LONG HAVE VOLLLIVED IN 3	THE CITY OF ANIDDEWS (ANIDDEWS COLINITY)

MOST RECENT PRIOR PUB BOARD/COMMISSION/CIVIC ORGANIZATION	FROM	ТО
PLEASE DESCRIBE ANY QUALIFICATIONS OR EXPERTISE THOW DOES YOUR EDUCATIONAL BACKGROUND, WORK	EXPERIENCE, OR OTHER LIFE EX	KPERIENCES
QUALIFY YOU TO CONTRIBUTE TO THE BOARD?		
PLEASE TELL US WHY YOU WISH TO SERVE ON THIS BOA	ARD?	
PLEASE PROVIDE ANY ADDITIONAL INFORMATION THAT TO THIS APPLICATION:		W IN RELATION
DO YOU HAVE ANY RELATIVES WHO CURRENTLY WORK IF YES, PLEASE LIST THEIR NAME AND POSITION:		NO
IS THERE ANY WAY THAT YOU OR A MEMBER OF YOUR FINANCIALLY BY YOUR SERVICE ON THIS BOARD?		AND TO BENEFIT
STATEMENT OF INTENT: "IF APPOINTED, I AGREE TO SE WHICH I HAVE APPLIED. I UNDERSTAND THAT IF I S EXPECTED TO PARTICIPATE ACTIVELY IN ALL MEETINGS AGENDAS AND ALL RELATED MATERIALS PRIOR TO THE STATE LAW REQUIRES I UNDERGO TWO HOURS OF TR	SHOULD BE APPOINTED TO A E S. I WILL PREPARE FOR MEETIN E START OF THE MEETING. I UI	BOARD, I WILL BE GS BY REVIEWING NDERSTAND THAT

AND <b>PUBLIC INFORMATION ACT</b> WITHIN 90 DAYS OF MY APPOIL	NTMENT. I AGREE TO ADHERE TO THE		
ATTENDANCE REQUIREMENTS AND TO CONTACT THE CITY SECRET	TARY'S OFFICE IF THERE IS ANY CHANGE		
IN MY INFORMATION AS SUBMITTED ON THIS APPLICATION. I	WILL SUBMIT A CONFICT OF INTEREST		
AFFIDAVIT AND ABSTAIN FROM ANY DISCUSSION OR VOTE ON AN	IY MATTER THAT COMES BEFORE ME IN		
WHICH I HAVE A SUBSTANTIAL PROHIBITED INTEREST. I HEREBY	AFFIRM THE INFORMATION PROVIDED		
HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. "			
Signature D	Pate		

NOTE: This application will remain on file for one year.