

Name _____ Date: _____

Street Address: _____

Mailing Address: _____

Email Address: _____ Home/Cell Phone: _____

Present Employment: _____

May We Contact You At Work? No Yes / Work Phone: _____

Position Applying For: _____ Term Expiring: _____

Occupational Background: *previous employment – paid or unpaid:*

Educational Background: *Schools attended:*

School name (no acronyms)	Last grade level completed	Diploma/degree/certificate	Course of study (optional)

Prior Governmental Experience: *elected or appointed*

By signing this document, I hereby state:

- That I will accept the nomination for office indicated;
- That I will qualify for said office if appointed;
- That all information provided by me on this form, including my occupation, educational and occupational background, and prior governmental experience is true to the best of my knowledge.

Applicant's signature _____ Date signed _____

This information is a matter of public record, and may be published or reproduced.

Please answer the following questions, attaching additional sheets as may be necessary.

1. Experience serving on an elected/appointed board: _____

2. Experience volunteering with the City of Lakeside:

3. Describe your community involvement experience: _____

4. Describe your vision for the future of Lakeside: _____

5. Describe the time commitment you can make to the Planning Commission position:

6. Your reason(s) for applying for the Planning Commission position:

Printed Name:

Please attach any other relevant information to this application. Applications must be submitted to the City Recorder, Manager@cityoflakeside.org City of Lakeside, 915 North Lake, Lakeside, OR 97449.