Name		Date:		
Street Address:				
Mailing Address:				
Email Address:	Home/Cell Phone:			
Present Employment:				
May We Contact You At W	/ork? □ No □	Yes / Work Phone:		
Position Applying For:		Term Expir	Term Expiring:	
Occupational Backgrou	ınd: previous emplo	/ment – paid or unpaid:		
Educational Background: Schools attended:				
School name (no acronyms) La	st grade level completed	Diploma/degree/certificate	Course of study (optional)	
L				
Prior Governmental Exp	perience: elected or	appointed		
That I will qualify foThat all information	e nomination for office resaid office if appoir provided by me on t	nted; his form, including my o governmental experier	occupation, educational nce is true to the best of	
Applicants signature		Date	signed	

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

5. Describe the time commitment you can make to 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.