



### **Education and Experience**

List most advanced degree received: \_\_\_\_\_

School: \_\_\_\_\_ Year: \_\_\_\_\_

Volunteer Experience/Community Service: \_\_\_\_\_

Please specify membership on any other governmental board/commission/committee:

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### **Board or Commission Interest**

Live in the city       Work in the city       Own a business in the city

Attend school within the city       Other significant interest \_\_\_\_\_

Have you ever been a member of a board or commission?     Yes     No

If yes, please specify: \_\_\_\_\_

*Board/Commission*

*Dates of Service*

*Board/Commission*

*Dates of Service*

*Board/Commission*

*Dates of Service*

Have you attended a board or commission meeting in the past 12 months?

Yes     No

If yes, please specify: \_\_\_\_\_

Do you have any comments about your experience while serving?

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In your opinion, what are the three most pressing issues facing your prospective board or commission?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Describe ways in which you have contributed to your community.

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What do you hope to accomplish by serving?

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Based on your relevant skills or interests, in which of the following areas do you think you can contribute most?

<input type="checkbox"/> Arts/Culture	<input type="checkbox"/> Budget/Finance	<input type="checkbox"/> Consumer Affairs	<input type="checkbox"/> Economic Development
<input type="checkbox"/> Education/Youth	<input type="checkbox"/> Environment	<input type="checkbox"/> Health	<input type="checkbox"/> Housing
<input type="checkbox"/> Landmarks	<input type="checkbox"/> Land Use	<input type="checkbox"/> Urban Planning	<input type="checkbox"/> Parks/Recreation
<input type="checkbox"/> Public Safety	<input type="checkbox"/> Sanitation	<input type="checkbox"/> Seniors	<input type="checkbox"/> Social Services
<input type="checkbox"/> Transportation	<input type="checkbox"/> River	<input type="checkbox"/> Other: _____	

Please list current and past civic, fraternal and non-profit organizations in which you are/have been active.

Name of Organization	Dates	Title
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please provide any additional information you believe would be useful in considering your application.

\_\_\_\_\_

### **Certification**

I am not employed by the City of Kerrville.

If appointed, I will notify the City of Kerrville of any changes in my residence or business, or of any other relevant changes that would affect my appointment. I will also notify the City if any potential conflicts of interest arise.

I recognize that my appointment requires my regular attendance and participation at all scheduled meetings, failure to do so may result in my removal. I am willing to make this commitment of time and effort.

I hereby certify that all information in this application is complete, truthful, and accurate to the best of my knowledge.

\_\_\_\_\_

\_\_\_\_\_

\*Some boards/commissions/committees require members to reside within the City limits.

Please return completed form to the City Secretary's office for processing, 701 Main Street; 257-8000. Your application will be kept on file for 12 months.

NOTE: When filed at city hall, this will become a public document that may be disclosed per the Texas Public Information Act.