Please Note: It is Council policy that applicants must be a city or urban growth boundary resident, business owner or employee of a business for at least one year, depending on committee/commission residency requirements.

CITY OF SEASIDE

Interest Form for Committee/Commission/Board Vacancies

NAME		PHONE/	
Last	First		
ADDRESS			
MAIL ADDRESS (DIFFE	ERENT THEN ABOVE)		
BUSINESS ADDRESS (I	F APPLICABLE)		
EMAIL ADDRESS			
LENGTH OF TIME IN S	EASIDEARE YO	DU A REGISTERED VOTER IN SEASID	E: Yes No
OCCUPATION			
PAST OCCUPATIONS_			
List committee/commission	ons on which you would like to) serve:	
	ons you are currently appointed	d to:	
		late to service on committee/commissions:	
List skills and special know	wledge that you may have acq	uired from these activities:	
		ontest" to any crime, offense, or major traff	
When?	Please expl	lain:	
Please list 3 references inc years. (No City Council M		isor, and people that have known you for at	t least 2
NAME	RELATIONSHIP	ADDRESS	PHONE

I authorize, any person or entity contacted by the City of Seaside to furnish information relating to my appointment to the Commission/Committee/Board indicated above and I release any such person or entity from any and all liability for furnishing such information. I also release the City of Seaside from any and all liability for conducting such an investigation.