

## Application for Appointment to Boards, Committees, and Commissions City and Borough of Sitka

Name:		Daytime Phone:	
Address:		Evening Phone:	
Email Address:		Fax Number:	
Length of Residence ir	n Sitka:	Registered to vote in Sitka?Y	'esNo
Employer:			
Organizations you belon	g to or participate in:		
Explain your main reasor	າ for applying:		
What background, exper	rience or credentials will you bring	to the board, commission, or committee me	embership?
not limited to:  • A substantial fine	·	arise from your appointment. These may inc nat could be influenced by your appointmen e scope of this appointment.	
Please attach a letter of i that will enhance your m		ncludes your education, work, and voluntee	r experience
(To be considered, your a	oplication must be complete <u>AND</u> b	e accompanied by one of the above supporting	documents.)
Date:	Signature:		
Your complete applicat		rned to the Municipal Clerk's Office by	
during open session of	an Assembly meeting, however,	and published online. Appointments are n Assembly members may vote to discuss a esent when your application is discussed?	applicant(s) in
	Retur	n to:	

Board/Commission/Committee:\_\_\_\_\_

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