

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

Name:		Preferred Phone:
Address:		Alternate Phone:
Email Address:		Fax Number:
Length of Residence i	n Sitka:	Registered to vote in Sitka?YesN
Employer:		
Organizations you belo	ng to or participate in:	
Explain your main reasc	on for applying:	
What background, expe	rience or credentials will you bring	to the board, commission, or committee membership?
not limited to: • A substantial fire	•	arise from your appointment. These may include but an nat could be influenced by your appointment. e scope of this appointment.
Please attach a letter of that will enhance your r		ncludes your education, work, and volunteer experienc
(To be considered, your d	application must be complete <u>AND</u> b	e accompanied by one of the above supporting documents
Date:	Signature:	
Your complete applica		rned to the Municipal Clerk's Office by noon on
during open session o	f an Assembly meeting, however,	and published online. Appointments are normally managed Assembly members may vote to discuss applicant(s) esent when your application is discussed?Yes
	Retur	n to:

Board/Commission/Committee:_____