

COMMISSIONS APPLICATION

Please rank in numeric order only the Boards and

If appointed, you agree to attend regular and special meetings?

Signature:_____

Commissions you wish to serve on:

8.

Application Instructions

YES

Date:

NO

1. Please print or type answers to all

Historical Landmark Commission Planning & Zoning Commission				 Please print or type answers to all questions. Write N/A if not applicable. Application package consists of: Completed application form Essay questions Forward the completed Application Package to: City Clerks email: rrosales@cityofsanelizario.com 					
	APPLICANT INFORMATION								
1.	Last Name		First					M.I.	
2.	Street Address						Apt/U	Jnit #	
	City		State				ZIP		
	Mailing Address (if different)					- I			
3.	Home Phone	Work Phone				Cell Phone			
4.	E-mail Address								
5.	Do you currently reside in San Elizario?								
6.	Are you currently serving on a board or commission?				Y	ES	NO		
	If yes, which one?				Term Expires?				
7.	Have you ever served on a board or com	ave you ever served on a board or commission?			Y	YES NO			
	If yes, list name of board or commission and term(s) of office:								
	Board/Commission Name				T	erm			
	Board/Commission Name				Т	erm			
	Board/Commission Name				Т	erm			



ESSAY QUESTIONS								
Name of Board or Commission applying for:								
1. Have you ever attended a meeting of this board or commission? YES NO								
2. Why do you want to serve on this board or commission?								
3. What are your qualifications/skills or education that you will bring to this board or commission?								
Signature: Date:								
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