

## CITY OF CUERO P.O. BOX 660 • CUERO, TEXAS 77954 • (361) 275-6114 • FAX (361) 275-6265

## **Application for Consideration of Appointment** The Public Information Act (PIA) may allow for public review of this application upon request. New Application Re-appointment Application Name of Board or Committee: \_\_\_\_\_ **Personal Information** Mr. □Dr. Ms. Mrs. Esq. Other Name:\_\_\_\_\_(Last) (First) (Middle) Home Address: \_\_\_\_\_(Street) Mailing Address: \_\_\_ **Contact Information** Phone No. (home) (business) Fax No. (home) (business) E-MAIL Address (Optional): Are you a qualified voter in the city of Cuero? \_\_\_No Yes Do you live inside the city limits of Cuero? \* Yes No How Long? \_\_\_\_\_ **Employment** Employer: \_\_\_\_\_(Name/Address) Occupation:\_\_\_\_ City/State Zip Code To the best of your knowledge, are you employed by, or a member of, any entity (business or nonprofit) with proposals, programs, requests, businesses, applications, licenses or any other matters which may come before a board or commission for review, funding, support, or approval during the next two years? Yes

If yes, please list the name of entity and interest:

## **Education and Experience**

List most advanced degr	ee received:				
School:Year:					
Volunteer Experience/Co	ommunity Service:				
Please specify members	hip on any other governmental board/c	commission/committee:			
U that is the other	Board or Commission Inte				
Live in the city		☐Own a business in the city			
	ne city  Other significant interesember of a board or commission?				
ii yee, please speeliy	Board/Commission	Dates of Service			
-	Board/Commission	Dates of Service			
-	Board/Commission	Dates of Service			
	ents about your experience while servir				
In your opinion, what commission?	are the three most pressing issue	es facing your prospective board o			
1					
2	· ·				
3					
Describe ways in which	you have contributed to your communit	ty.			

What do you hope to accomplish by serving?

Based on your releve contribute most?  Arts/Culture	_		llowing areas do you think you can		
☐ Education/Youth	☐ Budget/Finance	☐ Health	Economic Development		
Landmarks	☐ Land Use	☐ Urban Planning	☐ Housing ☐ Parks/Recreation		
☐ Public Safety	☐ Sanitation	Seniors	Social Services		
☐ Transportation	River	_	Social Services		
	_				
Please list current ar active.	nd past civic, fraterna	al and non-profit orgar	nizations in which you are/have been		
Name of Organization	n	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 Cuero.				
If appointed, I will not relevant changes that of interest arise.	tify the City of Cuero of twould affect my app	of any changes in my r pointment. I will also n	esidence or business, or of any other otify the City if any potential conflicts		
I recognize that my meetings, failure to deffort.	appointment requires lo so may result in my	my regular attendand removal. I am willing	ce and participation at all scheduled to make this commitment of time and		
I hereby certify that a my knowledge.	all information in this a	application is complete	, truthful, and accurate to the best of		
Signature		Date			
			de within the City limits. ocessing, P.O Box 660, 212 E. Main		

Street; 361-275-6114. 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.