



Number \_\_\_\_\_

OFFICIAL USE ONLY

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**CITIZEN BOARD AND COMMISSION EXPRESSION OF INTEREST FORM**

Please Indicate with an (X) as many as meet your interests:

- |   |  |
|---|--|
| <input type="checkbox"/> BOARD OF ZONING APPEALS          | <input type="checkbox"/> LIBRARY BOARD                       |
| <input type="checkbox"/> CITY PLANNING COMMISSION         | <input type="checkbox"/> OSAGE CITY TREE BOARD               |
| <input type="checkbox"/> INDUSTRIAL DEVELOPMENT COMMITTEE | <input type="checkbox"/> PARKS AND RECREATION ADVISORY BOARD |
| <input type="checkbox"/> COMMUNITY IMPROVEMENT COMMITTEE  | <input type="checkbox"/> PUBLIC BUILDING COMMISSION          |
| <input type="checkbox"/> CITY COUNCIL                     |  |

Specific Project: \_\_\_\_\_

Special Instructions:

- 1) Please print in black ink or type, if possible. Please do not write on the back of this form; use another sheet of paper if necessary.
- 2) Please return to: City of Osage City, City Clerk's Office, 201 S. 5<sup>th</sup> Street, P.O. Box 250, Osage City, Kansas 66523.

Please Note: All information provided by you on this form is subject to Kansas Open Public Record Statutes. As public information, it may be requested by news media representatives or discussed in public meetings.

Title  Mr.  Mrs.  Miss  Ms.  Dr.

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Number of Years you have lived in Osage City: \_\_\_\_\_

Telephone (Home) \_\_\_\_\_ (Business) \_\_\_\_\_ (Fax) \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Education (Highest School Year, degrees, etc.) \_\_\_\_\_

Prior Appointed or Elected Offices Held (if any) \_\_\_\_\_

Present and Past Community Volunteer Activities: \_\_\_\_\_

Why would you like to serve? (Please discuss specific interest, experience and qualification which would make you an effective board member.)

Date: \_\_\_\_\_ Signature: \_\_\_\_\_