CITY OF GLADSTONE

APPLICATION FOR APPOINTMENT TO
CHARTER REVIEW ADVISORY COMMITTEE

NAME:_____

ADDRESS:_____

TELEPHONE: (HOME)_____(WORK)_____

EMAIL: _____

HOW LONG HAVE YOU LIVED IN GLADSTONE:_____

OCCUPATION/EMPLOYER (state your specific line of business): _____

_____

DESCRIBE YOUR ACTIVITIES
AND INTERESTS:_____

_____

_____

PREVIOUS AND CURRENT COMMUNITY AFFILIATIONS
AND ACTIVITIES, INCLUDING CITY APPOINTMENTS:_____

_____

_____

Have you ever applied for a Committee Position Before? _____ YES _____ NO

If yes, when?_____ What Committee?_____

Why would you like to serve on the Charter Review Committee?
(Attach additional materials or information if you wish).

_____

_____

_____

_____

SIGNATURE:_____DATE:_____