



CITY OF PENDLETON
COMMISSION/COMMITTEE APPLICATION FORM

DATE: _____

Name: _____

Address: _____

Email address: _____

Resident of City of Pendleton: Yes No

Phone Number: Work _____ Home _____

If you are employed, where are you employed?_____

What commission(s) or committee(s) are of interest to you?

- | | |
|--|--|
| <input type="checkbox"/> Airport Commission | <input type="checkbox"/> Parks & Recreation Commission |
| <input type="checkbox"/> Air Quality Committee | <input type="checkbox"/> PDC Advisory Committee |
| <input type="checkbox"/> Arts Committee | <input type="checkbox"/> Pendleton Convention Center |
| <input type="checkbox"/> Budget Committee | <input type="checkbox"/> Planning Commission |
| <input type="checkbox"/> Capital Improvements Program | <input type="checkbox"/> Restore Pendleton Committee |
| <input type="checkbox"/> Façade Committee | <input type="checkbox"/> Sanitary Regulatory Board |
| <input type="checkbox"/> Historical Landmarks Commission | <input type="checkbox"/> Transportation Committee |
| <input type="checkbox"/> Jumpstart Committee | <input type="checkbox"/> Tree Commission |
| <input type="checkbox"/> Library Board | <input type="checkbox"/> Other |

Why do you want to serve on the Commission or Committee?

What experience or training in your background would prepare you to serve on this commission or committee?

What night(s) of the week could you participate?

Monday Tuesday Wednesday Thursday

Have you previously served on a City Commission? Yes No

If yes, which: _____

Sponsor: _____

Signature: _____