

Please check the group(s) you would like to serve. If interested in more than one, please note the order of preference.

- | | |
|--|--|
| <input type="radio"/> Budget Committee
<input type="radio"/> Economic Development Commission
<input type="radio"/> Library Advisory Board
<input type="radio"/> Planning Commission | <input type="radio"/> Police Advisory Board (Inactive)
<input type="radio"/> Public Infrastructure Advisory Board
<input type="radio"/> Civic Leadership Academy |
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After _____ years served, I am seeking reappointment to:

APPLICANT INFORMATION:

Full Name (Printed): _____

Occupation _____ Years Lived in Cornelius: _____

Home Address: _____

Mailing Address: _____

Telephone: _____ Email Address: _____

Are you in City Limits? _____ Meeting Availability: _____

Note: Most groups require members to be a City of Cornelius resident. If you are not a resident, check with the City Recorder to see which group you may apply for. cityrecorder@corneliusor.gov

Why are you interested in serving?

What contributions do you believe you can bring to the group(s)?

What qualifications or experience do you have that will help you serve?

Advisory Board, Committee, & Commission Application

Describe any past or current involvement in community organizations or activities.

Have you previously held any appointed or elected governmental positions? If so, please specify.

I hereby attest that the information provided above is true and accurate to the best of my knowledge.

Signature

Date