



City of Payette

Appointment for _____ Commission Application

Name: _____
(First) (Middle) (Last)

Street: _____
(Street) (City) (Zip)

E-Mail _____

Are you a City Resident? _____ Home Phone: _____

Occupation: _____ Work Phone: _____

Employment: _____
(Name of Employer)

(Street) (City) (Zip)

Please list your qualifications for effective Board membership (Include all City Boards you serve on and any relevant experience/expertise in the area you wish to serve):

Reason for seeking appointment (Areas of interest, goals, etc.):

Are there any reasons you may have a conflict of interest if you were appointed to a Board of Commission which you listed? _____ If yes, please explain.

References (Non-family, these may be personal or professional):

(Name) (Address) (Phone)

(Name) (Address) (Phone)

Signature: _____ Date: _____