



Façade Review Board Member Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

What days can you meet? Mo Tu We Th Fr

What times of the day work best for you? _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for the City? YES NO If yes, for what department? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

WHY DO YOU WANT TO SERVE ON THIS BOARD?

WHAT ARE YOUR WORK AND LIFE EXPERIENCES THAT WILL HELP YOU SERVE?

Current Employment

Are you currently employed? YES NO
 If no, are you retired? _____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

YES NO

Military Service (if applicable)

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____