

Façade Review Board Member Application

Applicant Information									
Full Name:						Date:			
	Last First				M.I.				
Address:									
	Street Address							Apartment/Unit #	
	City						State	ZIP Code	
Phone:				Emai	<u> </u>				
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	YES NO If no, are you authorized to work in the U.S.? ☐ ☐					
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 ret	red?					
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 a	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:					