

City Board and Commission Application

Please <u>number</u> your choices according to preference: (leave blank any one on which you do not wish to serve)						
Economic Development Authority		on Charter Commi	i*			
	Planning Commission	*For the Charter Con				
Park & Recreation Commission	Traffic Commission	indicate if you are a c				
Library Board	Note: Find Youth Commission applicat at www.columbiaheightsmn.gov/youth	YesNo	YesNo			
Name	Phone					
Street Address	City	State	Zip			
Finall Address		November of constant and be a see	ident of Octombic Heights			
Email Address		Number of years/months res	sident of Columbia Heights			
Property you own in Columbia Heights, if a	ny (other than Residence))				
	, (canon anamana)	,				
If you are appointed to a City Board or Com	mission, your Employer a	and phone number for the purp	pose of this appointment			
will be City Hall. If you have other work, ple						
Employer						
	D : 10 - Titl : 10					
Work Phone	Position Title/Occup	pation				
Educational Background:						
Volunteer, Civic, Professional and Community Activities:						
Professional Designations/Awards/Honors/Previous Government Service:						

Please describe why you are interested in serving on a board or commission and why you feel you are qualified: What unique perspective and life experience do you bring to a board/commission and the City?						
Please indicate what (if any) ev available for meetings	Does the current meeting schedule of the commission(s) you are interested work for you?					
MonTueWed	ThursFri	Yes	_No			
Please list three references (do not include the Mayor or Councilmembers)						
Name	Address	Phone		Email Address		
How did you hear about the position? If someone recommended you to apply, may we contact them? If so, please provide their contact information.						
Important Information About Your Application- Data Privacy Notice Minnesota law requires that you be informed of the purpose and intended use of the information you are providing on this application. Per Minnesota Statute 13.601, subd. 3a, your name, address, occupation, education, training, civic affiliations, qualifications, experience, and veteran status are available to anyone who requests the information.						
This information will be used to identify you as an applicant, enable us to contact you when additional information is required, send you notices, and assess your qualifications for appointment. This data is not legally required, but refusal to supply the information requested may affect the City Council's ability to accurately evaluate your application.						
Should you be appointed to a City of Columbia Heights Board or Commission, your residential address and either a phone number or email address where you can be reached will also become public information (per Minnesota Statute 13.601, subd. 3b). The purpose is to list contact information for Board/Commission members on a public roster.						
Please select which of the following you will allow listed on a public roster (you must select either email or phone number).						
EmailPhone NumberBoth						
By typing my name or handwriting my signature, I certify that I have read and understand the Data Privacy Notice and certify that the statements in this application are true and correct to the best of my knowledge:						
Signature:	ication are true and correct to	o the best of my	Date:			

Return completed application to: City of Columbia Heights Attn: City Clerk 590 40th Ave NE Columbia Heights, MN 55421