City of Centennial

OPEN SPACE ADVISORY BOARD
APPLICATION FORM

Date_____

NAME:_____

ADDRESS: _____Zip_____

TELEPHONE NO.: (Work)_____ (Home)_____

EMAIL ADDRESS: _____

DISTRICT: _____ LENGTH OF TIME IN CENTENNIAL: _____

1. Why do you want to serve on the Centennial Open Space Advisory Board?

_____
_____
_____
_____

2. What skills and abilities will you bring to the Board?

_____
_____
_____
_____

3. Do you currently have any financial or other interest in any business or other governmental entity that would present a conflict of interest with the work of Open Space Advisory Board?

Yes: _____ No: _____

If yes, please explain: _____
_____
_____
_____

4. Please list schools attended, and area of study and degrees obtained:

_____
_____
_____
_____

5. Please list any business, professional or general experience that would be helpful to this board: _____

_____

_____

_____

6. Are you currently serving on a Board/Commission/Authority?_____

_____

_____

_____

7. Are you related to a City employee?_____

If yes, please state name(s) and relationship: _____

_____

_____

8. Is there anything that would prevent you from being available to meet on the 4th Tuesday evening of each month (travel, work, etc.)? _____

_____

Is there a night of the week that you have a regular conflict? _____

_____

_____

Signature: _____

Date: _____

FOR OFFICE USE ONLY:

Date Received: _____ Received by: _____

Interview Date: _____

Comments:

Return to: City Clerk, City of Centennial, 13133 E. Arapahoe Road, Centennial, CO 80112 no later than 5 p.m. on Friday, October 10, 2014.

You are welcome to include a résumé with this application.