



**LIQUOR LICENSING AUTHORITY  
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 Liquor Licensing Authority?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Do you currently have any financial or other interest (such as a family relationship) in any establishment selling, or with the potential to sell, alcoholic beverages?

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, or have you ever served, on a Board, Commission, Authority? \_\_\_\_\_  
\_\_\_\_\_

7. Are you available each month on the first and third Thursday evenings beginning at 6 p.m.? \_\_\_\_\_

8. Have you ever been convicted of a felony or a violation of the liquor code? \_\_\_\_\_  
If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Where/how did you hear of the openings on this board? Please check one or more of the following:**

The Villager	The Centennial Citizen	City Web Site	Your Hub
Centennial Connection Newsletter	Social Media	Other (Please specify)	

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

FOR OFFICE USE ONLY:

Date Received: \_\_\_\_\_ Received by: \_\_\_\_\_

Interview Date: \_\_\_\_\_

Comments:

Return to: Centennial City Clerk, Liquor Licensing Authority Application  
13133 E. Arapahoe Road, Centennial, CO 80112

**No later than February 13, 2014 at 5 p.m.**

**You are welcome to include a resume with this application, but it is not required.**