



**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: _____

Comments:

APPLICATION SUBMISSIONS TO:

City Clerk, City of Centennial, 13133 E. Arapahoe Road, Centennial, CO 80112
or to bsetterlind@centennialco.gov
no later than 5:00 p.m. on Wednesday, October 5, 2016.

You are welcome to include a résumé with this application.