

Signature \_\_\_

## **Application for Appointment**

Date:	
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The city of Chehalis accepts applications from anyone residing in the city limits of Chehalis, who meets the required criteria for each board, commission, or committee. The corresponding RCW, CMC, or Resolution for appointment criteria is noted below. Return completed form to the Chehalis City Clerk, City Hall, 350 N. Market Boulevard, Chehalis, WA 98532 or via email to recordrequests@ci.chehalis.wa.us. For more information contact the City Clerk at 360-345-1042.

I wish to be considered for appointment to the following	g board, commission, or committee:
Lodging Tax Advisory Committee (Res. 1-98)	Historic Preservation Commission (CMC 2.66)
Planning Commission (CMC 2.48)	Other
Civil Service Commission (CMC 2.56   RCW 41.08	Fire   RCW 41.12 Police)
PLEASE PRINT	
Name:	Home Phone:
*Home Mailing Address:	Cell Phone:
	*Email:
Employer:	Work Phone:
Employer Address:	Work Cell:
	Work Email:
If yes, please explain:	ne above boards, commissions, committees?
Available to attend: Evening Meetings?	s □No Daytime Meetings? □ Yes □ No
Approximately how many hours each month can you de	evote to city business?
Provide a brief statement of qualifications and reason for	or requesting appointment:

\* Please indicate how you wish to receive meeting information.