



BOARD / COMMISSION MEMBERSHIP APPLICATION

PLEASE PRINT CLEARLY IN INK OR TYPE

Date of Application: _____

*** Board interested to serve:**

☐ Airport Advisory Commission	☐ Charter Review Committee	☐ Civil Service Commission
☐ Building Advisory Board of Appeals	☐ Design Review Board	☐ Evergreen Cemetery Committee
☐ Library Advisory Board	☐ Parks and Recreation Committee	☐ Planning and Zoning Commission
☐ Police and Fire Advisory Committee	☐ Public Safety Personnel Retirement Board	☐ Transit Advisory Committee
☐ Bisbee Arts Commission	☐ Board of Adjustment	☐ Tourism Marketing Advisory Committee

****Complete One (1) Application for each Board / Commission you wish to serve.***

Last Name First Name Middle Initial

Mailing Address Number Street City State Zip Code

Residential Street Address: _____

Telephone Number(s): _____

Email Address: _____

* I have been a resident of Bisbee for _____ years * Are you currently on any Boards? _____

** (Less than one-year residency or serve on more than one City of Bisbee Board or Commission, please complete Waiver Portion of this Form)*

Please provide a brief summary of Education and Employment Experience (Employer, Job Titles, Dates

Employed): _____

Please provide a brief summary of Civic/Volunteer Experience:

Other Background Information Relevant to Serving in this Position:

I am qualified and interested in serving on this Board because:

Have you ever been convicted of a felony or misdemeanor by any court, or do you have any pending criminal charges against you? ☐ Yes ☐ No **If yes, please Explain:** _____

WAIVER REQUEST (If Applicable):

I am requesting that the following rule(s) be waived in order to serve on the Commission:

_____	Residency Requirement (Bisbee Resident for less than 1 year)
_____	Length of Service (I have served_____ terms)
_____	Number of Commission Memberships currently served. I also serve on the:

I am requesting this/these waivers for the following reasons for consideration:

I hereby certify and affirm that all the information contained in this application is true, complete and correct. I understand that false or misleading statements or the omission of important information made on this application or any time during the process may disqualify me from volunteer work with the City of Bisbee. I understand that the Mayor and Members of the Council must approve any waiver request.

Signature: _____ **Date:** _____

When complete, please return to:
City Clerk Office 118 Arizona Street, Bisbee, AZ 85603

E-mail: nwilliams@bisbeeaz.gov