

City of Junction City

Application for Citizen Members on Council Committees

Name: _____

Date: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Occupation: _____

E-Mail: _____

Please check the Committee that you are applying for:

Public Safety Committee

Finance/Judiciary Committee

Public Works Committee

Community Services and Development Committee

Have you served previously on any of the above Committees or on City Commissions, Council or other Committee/Boards? _____

If yes, which one/ones and when? _____

Why do you want to serve? (Use additional sheet if needed) _____

Please list any special qualifications you may have: _____

Are you available for meetings during the evening? _____

*****Please answer supplemental questions on following page*****

Signature: _____

PLEASE RETURN YOUR COMPLETED APPLICATION AND SUPPLEMENTAL QUESTIONNAIRE TO:

City Recorder Kitty Vodrup

680 Greenwood St

PO Box 250

Phone: 541-998-2153

Junction City OR 97448

Fax: 541-998-3140

kvodrup@ci.junction-city.or.us



Supplemental Questionnaire:

1. Please describe your Employment/Educational Background.

2. What particular interests do you have in the areas that this committee deals with?

3. Do you have any relatives, now or in the past, who work or have worked for the City, and if so, which department?

4. What do you see as the greatest opportunities/challenges for the committee this coming year?
