



CITY OF ARANSAS PASS

BOARDS & COMMISSIONS APPLICATION

DATE: _____

List the Boards and/or the Commissions on which you want to serve:

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

Name: _____

Phone No. _____

Address: _____

Alt. Phone: _____

City/State/Zip: _____

E-mail: _____

Current Employment: _____

Resident of Aransas Pass _____ Registered Voter? Yes _____ No _____

Educational Background: _____

Occupational Experience: _____

Additional experience that would qualify you to serve on a City Board or Commission:

Boards or Commissions you have served on previously and dates served:

Civic or community activities you have been involved with:
