

CITY OF CUERO P.O. BOX 660 • CUERO, TEXAS 77954 • (361) 275-6114 • FAX (361) 275-6265

Application for Consideration of Appointment The Public Information Act (PIA) may allow for public review of this application upon request. New Application Re-appointment Application Name of Board or Committee: **Personal Information** □Dr. □Mr. ∏Ms. Mrs. Esq. Other Name: (Last) (First) (Middle) Home Address: _____ (Street) Mailing Address: **Contact Information** E-MAIL Address (Optional): ____Yes __ No Are you a qualified voter in the city of Cuero? Do you live inside the city limits of Cuero? * ____Yes How Long? **Employment** Employer: _____ (Name/Address) Occupation:____ Business Address:____ City/State Zip Code To the best of your knowledge, are you employed by, or a member of, any entity (business or nonprofit) with proposals, programs, requests, businesses, applications, licenses or any other matters which may come before a board or commission for review, funding, support, or approval during the If yes, please list the name of entity and interest:___

Education and Experience

List most advanced degre	ee received:			
School:Year:				
Volunteer Experience/Cor	mmunity Service:			
Please specify membersh	nip on any other governmental board	d/commission/committee:		
	Board or Commission Int	<u>terest</u>		
☐ Live in the city ☐Work in the city		☐Own a business in the city		
Attend school within the	e city Other significant intere	est		
Have you ever been a me	ember of a board or commission?	☐ Yes ☐ No		
If yes, please specify:				
	Board/Commission	Dates of Service		
_	Board/Commission	Dates of Service		
	Board/Commission	Dates of Service		
☐ Yes ☐ No If yes, please specify:	rd or commission meeting in the pas			
commission? 1 2	are the three most pressing issu	ues facing your prospective board or		
Describe ways in which yo	ou have contributed to your commur	nity.		

What do you hope to accomplish by serving?

Based on your relecontribute most?	vant skills or interest ☐Budget/Finance	_	lowing areas do you think you can
<u> </u>		_	
☐ Education/Youth	☐ Environment	∐ Health	☐ Housing
Landmarks	Land Use	☐ Urban Planning	Parks/Recreation
☐ Public Safety	Sanitation	Seniors	Social Services
☐ Transportation	River	Other:	
Please list current a active.	nd past civic, fraterna	ıl and non-profit organ	izations in which you are/have been
Name of Organization		Dates	Title
Please provide any a	additional information y	ou believe would be u	seful in considering your application.
		Certification	
I am not employed by	y the City of Cuero.		
• •	,	, ,	esidence or business, or of any other otify the City if any potential conflicts
			ce and participation at all scheduled to make this commitment of time and
I hereby certify that a my knowledge.	all information in this a	application is complete	, truthful, and accurate to the best of
Signature		Date	

NOTE: When filed at city hall, this will become a public document that may be disclosed per the Texas Public Information Act.

^{*}Some boards/commissions/committees require members to reside within the City limits. Please return completed form to the City Secretary's office for processing, P.O Box 660, 212 E. Main Street; 361-275-6114. Your application will be kept on file for 12 months.