



**CITY OF FRUITA
BOARDS AND COMMISSIONS
MEMBERSHIP APPLICATION**

BOARD OR COMMISSION: _____

NAME: _____

MAILING ADDRESS: _____

City	State	Zip
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RESIDENCE ADDRESS: _____

PHONE NUMBER: _____

Home	Work
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E-MAIL ADDRESS: _____

How long have you been a resident of Fruita? _____

Occupation/Employer: _____

List any volunteer and/or work experience:

Are you presently serving on a board or commission? If so, which one(s)?

Why do you want to be a member of this board or commission?

List any abilities, skills, or interests which are applicable to the board or commission for which you are applying.

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Are you committed to attending meetings? Yes No

Are you committed to serving an entire term? Yes No

Please specify any activities which might create serious conflict of interest if you should be appointed to a particular board or commission. (If unsure, please call the City Manager's office at 858-3663)

List any licenses, certificates or other specialized training applicable to the board or commission for which you are applying.

Additional information or references you believe may be helpful in considering your application.

Signature _____ Date _____

ATTACHMENTS TO APPLICATION MUST BE LIMITED TO TWO PAGES

Please feel free to submit a resume along with this application. Application and any attachments should be returned to the Fruita City Council c/o the City Clerk, 325 E. Aspen, Fruita, CO 81521 or sent via email to dwoods@fruita.org . Thank you.