APPLICATION – COMMITTEE VOLUNTEER APPOINTMENT

_____ New (Entire Form)
_____ Reappointment (Part I only)

PART I

NAME: _____ EMAIL: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL/WORK PHONE: _____

Consideration for appointment to:

_____ Arts Council
_____ Budget Committee
_____ Events Committee
_____ Historic Preservation Commission
_____ Planning Commission
_____ Sustainability Committee
_____ Youth Committee
_____ Board of Adjustment
_____ Design Review Committee
_____ Healthy West Jordan Committee
_____ Parks & Open Land Committee
_____ Sister City Committee
_____ Western Stampede Committee

PART II

PROFESSIONAL/EMPLOYMENT SUMMARY:

_____

_____

_____

_____

COMMUNITY SERVICE SUMMARY:

_____

_____

_____

_____

OTHER TRAINING OR QUALIFICATIONS:

_____

_____

_____

_____

PERSONAL STATEMENT REGARDING DESIRE TO BE APPOINTED:

_____

_____

_____

_____

Arlene Farley
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West Jordan, UT 84088
801-569-5100
arlenef@wjordan.com

Submitted for recommendation:
Date: _____