City of Edmonds
Citizen Board and Commission Application

(Please Print or Type) Note: This form is a public record and may be subject to disclosure upon request

(Board or Commission)

Name: ____________________________ Date: ____________________________

Address: ____________________________________________________________

________________________________________________________

Day Phone: ____________________________

Evening Phone: ____________________________

Cell: ____________________________

E-mail: ____________________________

Occupational status and background: ________________________________________

________________________________________________________

Organizational affiliations: ________________________________________________

________________________________________________________

Why are you seeking this appointment? ________________________________________

________________________________________________________

What skills and knowledge do you have to meet the selection criteria? ________________

________________________________________________________

Please list any other Board, Commission, Committee, or official positions you currently hold with the City of Edmonds: ________________________________________________

________________________________________________________

Additional comments: ________________________________________________

________________________________________________________

Please return this completed form to:

Edmonds City Hall
121 5th Avenue North
Edmonds, WA 98020
carolyn.lafave@edmondswa.gov
Phone: 425.771.0247 | Fax: 425.771.0252

_____________________________ Signature

Revised 4/30/14