



City of Molalla
Application for Appointment to Citizen
Committee/Board/Commission/Council

Date:

Committee/Board/Commission/Council position of interest: _____

Name: _____

Address: _____

State/Province: _____ Zip/Postal Code: _____

Home Phone: _____ Work Phone: _____

*E-Mail _____

Current or Previous Community Affiliations or Activities:

Why would you like to serve on this Committee/Board/Commission/Council and give any other background you might have in this area.

If applying for re-appointment to this Committee/Board/Commission/Council/Task Force, please indicate what has been the key accomplishment of the group during your service.

If you could make any improvement to the Commission/Board/Committee/Task Force, what would it be?

***Signature:**

117 Molalla Ave/PO Box 248 Molalla Oregon 97038
Ph: 503.829.6855 Fax: 503.829.3676 www.cityofmolalla.com