Application Form

COMMITTEES/BOARDS/COMMISSIONS/AUTHORITIES

You may mail the completed application to the Office of 747 Market Street, Room 1520, Tacoma, WA 98402-3766, or send via email to the of Environmental Policy & Stainability Office by pressing the "Submit" button at the bottom of this application.
If you have questions about the application process, or if you need an accommodation in the application process, please contact the Office of Environmental Policy and Stainability (253) 591-5788 or dwiatr@cityoftacoma.org People with hearing or speech impairments may contact us through Washington Relay Services 1-800-833-6388 (TTY or ASCII), 1-800-833-6386 (VCO), or 1-877-833-6341 (STS).NOTE: This document and any attachments are subject to public disclosure. Certain information is exempt from disclosure. Refer to RCW 42.56 for information on state law regarding public records and certain records that are exempt from public disclosure.

Personal Information

I am interested in serving on the

Name

E-mail

Home Phone

Business Phone

Mobile Phone

Residential street address including city and zip code (not a P.O. Box)

Home mailing address (if different from above)

Business address

How long have you lived or worked in Tacoma?

Age ◯ 16-18 ◯ 18-24 ◯ 24-65 ◯ 65+

Please contact me at the following phone number: ◯ Home ◯ Business ◯ Mobile

Please contact me at the following address: ◯ Residential street ◯ Home mailing ◯ Business

The City of Tacoma promotes cultural and ethnic diversity on Citizen Committees, Boards, Commissions, and Authorities. Information in this section will assist in achieving this goal, and is voluntary.

◯ Asian ◯ Hispanic or Latino ◯ White/Caucasian ◯ African American/Black ◯ Native American/Alaskan Native

◯ Native Hawaiian or Other Pacific Islander ◯ Other

Check your City of Tacoma Council District, if known. ◯ 1 ◯ 2 ◯ 3 ◯ 4 ◯ 5

If Council District unknown click here

Occupation (If retired, please indicate former occupation or profession)

Military History

Are you or have you been a member of the Armed Forces of the United States?

Dates of Service

Branch of Service

Date & Type of discharge

Your Name

Date

COMMITTEES/BOARDS/COMMISSIONS/AUTHORITIES

Questionnaire

Please list any community activities that relate to this position.

List any experience that would assist you in serving on this committee/board/commission/authority.

Do you or any of your family members work for or serve on the board of directors of any organization which has contracted with or applied for funding from the City of Tacoma? Do you anticipate any involvement of this kind in the future? If yes, please describe the relationship.

Are you related to any elected City official or staff member? If yes, please explain.

Please indicate any activities you are involved with that may present a conflict of interest with the committee board or commission you are applying for.

Why are you interested in serving on this committee/board/commission/authority?

Your Name

Date

COMMITTEES/BOARDS/COMMISSIONS/AUTHORITIES

References and Resume

Please list references:

Name

Daytime Phone

Name

Daytime Phone

If you plan on mailing this form please remember to attach a copy of your resume and any letters of reference.
If you submit this form by email please attach your resume and any letters of reference to the email.

Print Submit