APPLICATION FOR APPOINTMENT TO A WHITMAN COUNTY BOARD/COMMITTEE

Please check the box for the committee you are seeking appointment.
Complete a separate application for each committee you are seeking appointment.

- □ Board of Adjustment
- □ Blue Ribbon Advisory Task Committee
- □ Capital Improvement Program
- □ Citizens Commission on Salaries for Elected Officials
- □ Civil Service Commission
- □ Community Education Training Center Advisory Committee
- □ Developmental Services Advisory Board
- □ Emergency Communications Advisory Comm.
- □ Greater Columbia Behavioral Health
- □ Law & Justice Planning Council
- □ LEOFF I Disability Board
- □ Lodging Tax Advisory Committee
- □ Noxious Weed Control Board
- □ Palouse Empire Fair Board
- □ Parks & Recreation Board
- □ Planning Commission
- □ Rural Library Board of Trustees
- □ Snake River Salmon Recovery Board
- □ Solid Waste Advisory Committee
- □ Southeast Washington Economic Development Association
- □ Water Conservancy Board

Name: _____ **Address:** _____

City: _____ **State:** _____ **Zip Code:** _____

Employer: _____ **Address:** _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone: _____ **Cell:** _____ **Business:** _____

Please send official Board/Committee correspondence to my: ☐ **Home** ☐ **Business**

Please state your reasons for wishing to serve on this Board/Committee: _____
_____
_____

Please state your applicable background for service on this committee. List qualifications for membership if applicable (i.e. employment, education and/or related volunteer experience: _____
_____
_____

Your response to any of the above may be continued on the back of this form. You may attach any other materials that you may want the County to consider.

Please list the name, address and telephone number of two persons who would be able to confirm your qualifications for this particular committee service:

Name: _____ **Address:** _____

Telephone: _____

Name: _____ **Address:** _____

Telephone: _____

Are you available for a personal interview should the County desire? □ **Yes** □ **No**

(Special needs you may be concerned about can be addressed if you are appointed.)

The above data is being collected in support of your application for appointment to a Whitman County Board/Committee. The Whitman County Commissioners, who will make appointments to the Board/Committee, will review the data. If you are chosen as a finalist to a board/committee, your application and the data it contains may become a part of the Board documentation, which is public record.

Signature of Applicant: _____ **Date:** _____

Return completed application to: Maribeth Becker, CMC, Clerk of the Board, 400 North Main Street, Colfax, WA 99111
Revised 01/21/11