



COMMUNITY SERVICE APPLICATION

FOR MEMBERSHIP ON THE: CON Committee for Shoreline Proposition 1: Sales and Use Tax for Sidewalk Transportation Improvements

(Please type or print)

Name _____

Are you a Shoreline resident or property owner? _____

Length of residence or ownership of property: _____

1. List your educational background. _____

2. Please state your occupational background, beginning with your current occupation and employer. _____

3. Describe your involvement in the Shoreline community. _____

4. Describe any special expertise you have which would be applicable to the position for which you are applying. _____

5. Describe your experience serving on any public or private boards or commissions.

6. Are you affiliated with any organizations which receive direct funding from the City of Shoreline (such as the Shoreline Museum, Shoreline – Lake Forest Park Arts Council, human services organizations, etc.)? _____

7. Describe why you are interested in serving in this position. _____

 Please return this application by the deadline of August 2, 2018:

MAIL or IN PERSON
 City of Shoreline, City Clerk
 17500 Midvale Avenue North
 Shoreline, WA 98133
 (206) 801- 2230

EMAIL
 clk@shorelinewa.gov

Disclosure Notice: Please note that your responses to the above application questions may be disclosed to the public under Washington State Law. The Personal Information form (page 3), however, is not subject to public disclosure.

*Thank you for taking the time to fill out this application.
 Volunteers play a vital role in the Shoreline government. We appreciate your interest.*

PERSONAL INFORMATION

Name _____

Home Address _____

_____ Zip Code _____

Home Telephone Number _____

Work Address _____

_____ Zip Code _____

Work Telephone Number _____

E-mail address _____

I declare under penalty of perjury under the laws of the State of Washington that the information provided herein is true and correct.

Signature _____ **Date**