

BOARDS/COMMISSIONS APPLICATION FORM

Name of Board/Commission _____

Applicant's Name _____

Residence Address _____

City/State/Zip _____

Mailing Address _____

City/State/Zip _____

Work Phone _____ Home _____ Phone _____

FAX _____ E-mail _____

Are you registered to vote within the Fairbanks North Star Borough [required by FNSB 2.21.040(A)]? Yes ___ No ___

Do you currently serve on any other Borough Boards & Commission? Yes ___ No ___

If yes please list which one: _____

Statement of Interest (use reverse side of form if necessary) _____

Brief Personal Biography (or attach resume) _____

Professional Licenses/Training _____

APPLICANT'S SIGNATURE _____ DATE _____

FOR OFFICE USE ONLY

Date Received _____ By _____

Note Any attachments _____

*** RETURN TO THE OFFICE OF THE MAYOR ***
DISCLOSURE OF PRESENT ECONOMIC INTEREST
APPOINTED PUBLIC MEMBERS OF A BOARD, COMMISSION, OR OTHER MUNICIPAL BODY

1. _____
(YOUR NAME: LAST, FIRST, MIDDLE)

2. _____
(BOARD, COMMISSION, OR OTHER PUBLIC BODY TO WHICH YOU ARE APPLYING.)

3. FOR TERM ENDING: _____

4. PLEASE GIVE THE BUSINESS NAME OF YOUR EMPLOYER, TYPE OF BUSINESS, YOUR POSITION.

(BUSINESS NAME) (TYPE OF BUSINESS) (YOUR POSITION)

5. IF YOU ARE SELF-EMPLOYED, CHECK THIS BOX: SELF EMPLOYED

DECLARATION

I understand that I am required to disclose any interest which would cause me or an immediate family member (including all household members) to have a personal or financial interest, different than those of the public generally, in matters coming before the board, commission, or other public body of the municipality to which I have been appointed. When such matters arise, I will also inform the other members on the record, so that the potential for a conflict of interest can be addressed prior to action by the public body.

I have the following interest(s) which would cause me, an immediate family member, or household member to have a personal or financial interest, different than those of the public generally, in matters coming before the public body during my term:
(ATTACH SEPARATE SHEETS AS NECESSARY)

If the situation changes, or I acquire new interests, I will file a supplemental disclosure with the Clerk's Office. I affirm that this **DISCLOSURE** is true and correct to the best of my knowledge.

Signature

Date

Please return to: **Mayor's Office**
Fairbanks North Star Borough
PO Box 71267
Fairbanks, AK 99707