Interest Form for City Board & Commission Appointments

The purpose of this form is to obtain information for use in making appointments to City boards, commissions, and committees, and to assist the Mayor in making inquiries concerning the qualifications of applicants for appointment. Please note that information provided in this document ***is public information,*** *with the exception of the confidential section. (Information in the confidential section will only be disclosed as required by law.) If you have a recently prepared biography or resumé, please attach it to this form. Thank you for your interest.*

Please return application, resumé and any additional information to:
Office of Neighborhood Involvement, 1221 SW 4th Ave, Room 110, Portland, Or 97204

To help ensure equal access to City programs, services and activities, the City of Portland will reasonably modify policies/procedures and provide auxiliary aids/services to persons with disabilities. Call 503-823-2030 or 503-823-4000 with such requests.

Name:
First *Middle Initial* *Last*
Mailing Address:

Occupation:

Daytime Phone: Email:

Biography/Resumé Attached? ☐ Yes ☐ No

CHECK UP TO THREE (3) GROUPS YOU ARE INTERESTED IN (descriptions are online):

☐ Adjustment Committee
☐ Alternative Technology Adv Com
☐ Building Code Board of Appeal
☐ Business License Appeals Board
☐ Citizen Campaign Committee
☐ Civil Service Board
☐ Community Budget Advisory Board
☐ Design Commission
☐ Development Review Advisory Com
☐ Elders in Action
☐ Electrical Code Board of Appeals
☐ Fire Code Board of Appeal
☐ Floating Structures Board of Appeal
☐ Golf Advisory Committee
☐ Historic Landmarks Commission
☐ Housing & Community Develop Com
☐ Housing Authority of Portland
☐ Human Rights Commission
☐ Independent Police - Citizen Review Com
☐ Investment Advisory Committee
☐ Mechanical Code Board of Appeal
☐ Metro Exposition Recreation Commission
☐ Mt. Hood Cable Regulatory Comm
☐ Noise Review Board
☐ North Reach Plan Advisory Committee
☐ Plumbing Code Board of Appeal
☐ Portland Community Media
☐ Portland Development Commission
☐ Portland/Multnomah Food Policy Council
☐ Portland/Multnomah Sustainable Dev Com
☐ Portland Parks Board
☐ Portland Planning Commission
☐ Portland Utility Review Board
☐ Private-for-Hire Board of Review
☐ Public Involvement Advisory Council
☐ Purchasing Board of Appeals
☐ Regional Arts & Culture Council
☐ River Community Advisory Committee
☐ Small Business Advisory Council
☐ Special Inspections Advisory Board
☐ Structural Engineering Adv Board
☐ Time, Place, Manner Adv. Committee
☐ Towing Board of Review
☐ Urban Forestry Commission
☐ Workforce Investment Board
☐ Children's Investm. Fund Alloc Com

List education, including degree(s) earned:

1st Choice:
Name of Board/Commission/Committee: _____

A. Reasons for wanting to serve on this group:

B. List skills or knowledge that would be relevant to this Board/Commission:

C. List work or volunteer experience that would add to your expertise for this Board/Commission

Dates (from/to) Employer or Volunteer Activity Responsibilities

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2nd Choice:
Name of Board/Commission/Committee: _____

A. Reasons for wanting to serve on this group:

B. List skills or knowledge that would be relevant to this Board/Commission:

C. List work or volunteer experience that would add to your expertise for this Board/Commission:

Dates (from/to) Employer or Volunteer Activity Responsibilities

3rd Choice:
Name of Board/Commission/Committee: _____

A. Reasons for wanting to serve on this group:

B. List skills or knowledge that would be relevant to this Board/Commission:

C. List work or volunteer experience that would add to your expertise for this Board/Commission

Dates (from/to) Employer or Volunteer Activity Responsibilities

List your experience working on diverse teams or committees:

Describe your understanding of the services the City of Portland provides:

My signature affirms that all information contained herein is true to the best of my knowledge, and that I understand that any misstatement of fact or misrepresentation of credentials may result in this application being disqualified from further consideration.

Signature: _____ **Date:** _____

North Reach Plan Advisory Committee Application Supplemental Questions

The North Reach Plan Advisory Committee seeks representatives from a diverse group with interests in the North Reach of the Willamette River. These include North Reach property owners and neighborhood associations and those with a general interest in the economic and ecological health of the area.

1. Please describe your interest in serving on the Advisory Committee and your experience regarding the main areas of the North Reach plan: economic prosperity, watershed health, access, community engagement and partnership building.

_____
_____
_____
_____
_____
_____

2. Please check your affiliation (select one)

☐ North Reach Industrial property owner
☐ Port of Portland
☐ Environmental organization
☐ Watershed Health
☐ Institutional Member (health, education…)
☐ Labor Unions
☐ Upland and In-water habitat restoration
☐ River Communities (Linnton, St. Johns…)
☐ On-water Recreation– Fishing, Boating
☐ Trails
☐ Infrastructure – Transportation
☐ Rail
☐ Sustainability
☐ Tribal
☐ City Budget Advisory Committee representative
☐ At-large Members (representing broad, regional perspective on the North Reach)
☐ Other _____ (please describe)

3. Please describe any work-related or volunteer experience that will be beneficial to your participation on the Committee.

_____
_____
_____
_____
_____

Please note this optional information **must** remain on a separate page from the rest of the application.

OPTIONAL INFORMATION

The City asks that you voluntarily provide the following information. The City will use this information for statistical purposes, such as tracking the geographical diversity of board and commission appointees. By providing this information, you will help us ensure that appointments represent a broad cross-section of the community. You are under no legal obligation to provide this information. State and federal law prohibit the use of this information to discriminate against you. The City will treat this information as confidential to the fullest extent allowed by law.

Age: ☐ **Under 18** ☐ **18-64** ☐ **65+**

Race: ☐ **African-American** ☐ **Asian** ☐ **Caucasian**
☐ **Hispanic** ☐ **Native American**

Gender: ☐ **Female** ☐ **Male**

Disability: ☐ **No** ☐ **Yes**

If yes, please specify: _____