

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):

- | | | |
|--|---|---|
| <input type="checkbox"/> Adjustment Committee | <input type="checkbox"/> Historic Landmarks Commission | <input type="checkbox"/> Portland Housing Advisory Commission |
| <input type="checkbox"/> Alternative Technology Adv Com | <input type="checkbox"/> Home Forward (<i>formerly the Housing Authority of Portland</i>) | <input type="checkbox"/> Portland Parks Board |
| <input type="checkbox"/> Arts Oversight Committee | <input type="checkbox"/> Human Rights Commission | <input type="checkbox"/> Portland Planning & Sustainability Com |
| <input type="checkbox"/> BOEC User Board | <input type="checkbox"/> Independent Police - Citizen Review Com | <input type="checkbox"/> Portland Utility Board |
| <input type="checkbox"/> Building Code Board of Appeal | <input type="checkbox"/> Investment Advisory Committee | <input type="checkbox"/> Private-for-Hire Board of Review |
| <input type="checkbox"/> Business License Appeals Board | <input type="checkbox"/> Mechanical Code Board of Appeal | <input type="checkbox"/> Public Involvement Advisory Council |
| <input type="checkbox"/> Citizen Campaign Committee | <input type="checkbox"/> Metro Exposition Recreation Commission | <input type="checkbox"/> Purchasing Board of Appeals |
| <input type="checkbox"/> Civil Service Board | <input type="checkbox"/> Mt. Hood Cable Regulatory Comm | <input type="checkbox"/> Regional Arts & Culture Council |
| <input type="checkbox"/> Community Budget Advisory Board | <input type="checkbox"/> New Portlanders Policy Commission | <input type="checkbox"/> River Community Advisory Committee |
| <input type="checkbox"/> Design Commission | <input type="checkbox"/> Noise Review Board | <input type="checkbox"/> Socially Responsible Investments Comm |
| <input type="checkbox"/> Development Review Advisory Com | <input type="checkbox"/> Plumbing Code Board of Appeal | <input type="checkbox"/> Structural Engineering Adv Board |
| <input type="checkbox"/> Elders in Action | <input type="checkbox"/> Portland Children's Levy Allocati on Committee | <input type="checkbox"/> Towing Board of Review |
| <input type="checkbox"/> Electrical Code Board of Appeals | <input type="checkbox"/> Portland Community Media | <input type="checkbox"/> Urban Forestry Commission |
| <input type="checkbox"/> Fire Code Board of Appeal | <input type="checkbox"/> Portland Development Commission | |
| <input type="checkbox"/> Floating Structures Board of Appeal | | |
| <input type="checkbox"/> Golf Advisory Committee | | |

List education, including degree(s) earned:

1st Choice:

Name of Board/Committee/Commission: _____

A. Reasons for wanting to serve on this group:

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

C. List work or volunteer experience that adds to your expertise for this Board/Commission/Task Force

Dates (from/to)	Employer or Volunteer Activity	Responsibilities
-----------------	--------------------------------	------------------

2nd Choice:

Name of Board/Committee/Commission: _____

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/Committee/Commission: _____

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:** _____

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: _____