CITY OF INGLESIDE ON THE BAY BOARDS & COMMISSIONS INFORMATION STATEMENT & APPLICATION

Your name has been suggested or you have requested an application for possible service on a City of Ingleside On The Bay Board or Commission.

Please specify the name of the Board or Commission in which you are interested in serving:

THE FOLLOWING INFORMATION WILL BECOME PUBLIC RECORD

| NAME: | | |
|---|--|-----------------|
| (LAST) | (FIRST) | (MI) |
| PHYSICAL ADDRESS: | n an | |
| MAILING ADDRESS: | | |
| HOME TELEPHONE: | WORK TELEPHON | E: |
| EMPLOYER/BUSINESS NAI | ME: | |
| PROFESSION: | | |
| Contract of the second s | USLY SERVED ON A BOARD O ON THE BAY? | |
| | THE NAME OF THE BOARD/CO SERVICE: | |
| HAVE YOU EVER BEEN CO | ONVICTED OF A CRIME, OTHE | ER THAN A MINOR |
| | R COMMUN ITY ENDEAVORS | |
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BRIEFLY EXPLAIN WHY YOU FEEL THAT YOUR PARTICIPATION ON THE AFOREMENTIONED BOARD WOULD BENEFIT THE CITY OF INGLESIDE ON THE BAY AND ITS CITIZENS. PLEASE LIST ANY EXPERIENCES OR QUALIFICATIONS THAT YOU POSSESS THAT YOU FEEL WOULD BE AN ASSET TO THAT POSITION.

I hereby affirm the information provided herein is true and correct to the best of my knowledge. I have read the list of Qualifications for appointment to the City Of Ingleside On The Bay Boards and Commissions, a copy of which is attached to this application, and further state that I meet all such requirements.

(SIGNATURE)

(DATE)

QUALIFICATIONS FOR APPOINTMENT:

- 1. Applicant must have been a resident of the City of Ingleside On The Bay for at least six (6) months prior to the date of Appointment.
- 2. Be a registered Voter in the City of Ingleside On The Bay at time of Appointment.
- 3. Have no felony conviction for which you have not been pardoned.
- 4. Applicant may not be an adversary party to litigation pending against the City of Ingleside On The Bay.
- 5. Applicant must not be in arrears on any City taxes, water/sewer/garbage (including late charges), or other obligations owed to the City of Ingleside On The Bay.
- 6. Applicant may not be a member of any other Board or Commission for the City of Ingleside On The Bay.

Thank you for taking the time to complete this application. It will be helpful to the Ingleside On The Bay City Council in making appointments to the various Boards & Commissions.

| Please return this form to : | | |
|------------------------------|-----------------------------|--|
| | Diane Hosea, City Secretary | |
| | 475 Starlight | |
| | Ingleside On The Bay, Texas | |