Carson City Application for Appointive/Volunteer Position

Name:						
Address:	Last		First		Middle Initi	al
	Street		City		State	Zip
Occupation/B	usiness:					
Telephone: w	ork	Home-		Cell		E-mail-
How long have y	ou lived in Carson	City:	Are you an	active Carson	n City Register	red Voter:
OTE: ONLY CO	OMPLETE IF A	DEGREE IS REC	QUIRED FOR	THIS POS	SITION	
College, professional, vocational or other schools attended		Major Subject			Degree Conferred	
•	ibe the Qualific Commission/C		ssess Which	You Feel	Would Be	An Asset
	onymity Ouromic	rations in Whic	ch You Have	· Participa	ted and Des	scribe

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app Cor so,	ointed to fill this or a mmittee where a discl and that I may not ass	devote to this community and plan to attend the future vacancy. I understand that if I am appollosure of Assets Statement is required by State sume office until 10 days after statement is file on this form are truthful and complete to the best	pinted to a Board/Commission or Law or Council Policy I shall do ed. I hereby declare that all
Nar	ne	Personal/Professional References: Address	Telephone #
Lei	igth of time in Busine	ess:	
Bu	siness in Carson City	Service Area:	
		Any Potential Conflicts of Interest?	If Yes Please Explain.

Mail directly to Carson City Executive Offices

Carson City Executive Offices, 201 N. Carson Street #2, Carson City NV 89701 Phone (775)887-2100 Fax (775) 887-2286