



Board and Commission Application

Name: _____
Address: _____
City, Easley, Zip: _____
Phone: _____
Email: _____

Occupation: _____
Employer: _____
Address: _____
City, Easley, Zip: _____
Phone: _____

Board/Committee Preference: (3-year term)

Mark which board you would like to apply for:

_____ Planning Commission	_____ Board of Zoning Appeals
_____ Accommodations Tax Advisory Board	_____ Art Committee
_____ Mayor's Advisory Committee	_____ Beautification Committee
_____ Architectural Review Board	_____ Housing Board
_____ Other	

Council Ward:

_____ Ward 1	_____ Ward 2	_____ Ward 3
_____ Ward 4	_____ Ward 5	_____ Ward 6

Are you seeking a first appointment or a reappointment?

_____ First Appointment _____ Reappointment

Why do you want to serve on this board or commission?

What personal and/or professional strengths would make you a good fit?

List City, Community, and/or Civic activities in which you are affiliated:

Volunteer or related experience:

By signing this application, you certify that the information provided is true and correct to the best of your knowledge. Any obstruction of this statement will make this application null and void.

Please check accordingly:

☐ **I AM** ☐ **I AM NOT** a resident of the City of Easley and I am willing to devote the time necessary to carry out the responsibilities and requirements of service to the City of Easley.

Applicant Signature

Date

Return application to: Jennifer Bradley, 205 North 1st St., Easley, SC 29640 or
jbradley@cityofeasley.com
Phone: 864-855-7900