



# Board and Commission Application

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, Easley, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City, Easley, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

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## Board/Committee Preference: (4-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

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## Council Ward:

\_\_\_\_\_ Ward 1

\_\_\_\_\_ Ward 2

\_\_\_\_\_ Ward 3

\_\_\_\_\_ Ward 4

\_\_\_\_\_ Ward 5

\_\_\_\_\_ Ward 6

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## Are you seeking a first appointment or a reappointment?

\_\_\_\_\_ First Appointment

\_\_\_\_\_ Reappointment

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

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

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

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**Volunteer or related experience:**

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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.

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**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.

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Applicant Signature

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Date

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**Return application to: Jennifer Bradley, 205 North 1<sup>st</sup> St., Easley, SC 29640 or**  
[jbradley@cityofeasley.com](mailto:jbradley@cityofeasley.com)  
**Phone: 864-855-7900**