

**Office of the City Clerk
City of Bethel
300 State Highway
Bethel, AK 99559-1388
Phone: (907)-543-1384
Fax: (907)-543-3817**



APPLICATION FOR APPOINTMENT TO A COMMITTEE OR COMMISSION

Committee(s)/Commission(s) of interest:

- Energy Committee**
- Parks, Recreation, Aquatic Health and Safety Center Committee**
- Finance Committee**
- Public Works Committee**
- Port Commission**
- Public Safety and Transportation Commission**
- Planning Commission**

All Planning Commissioners are required to provide a Financial Disclosure Statement to the City Clerk's Office within 30 days of appointment. Commissioners are also required to update those statements only when changes occur that would require an amendment to their statement.

NAME:

MAILING ADDRESS:

RESIDENCE ADDRESS:

HOME PHONE:

WORK PHONE:

CELL PHONE:

E-MAIL:

OCCUPATION:

EMPLOYER:

1. Do you (or an immediate family member) currently own or operate a business in the City of Bethel?
If so please provide the name and the type of business.

2. Are you (or an immediate family member) a member of a board of directors, officer of, or hold a management position with, an organization that has financial dealings of one thousand dollars or more in value with the city of Bethel? If so please provide the name and the type of business.

3. Do you currently have a direct or indirect financial or business interest with the City of Bethel, to include contracting, leaseholder, employee? If so please provide the name and the type of business.

4. Are you a resident of the City of Bethel? Yes No If so, for how long?

5. Does your schedule permit you to regularly attend required meetings: Yes No

I understand that this is a voluntary, appointed position to be confirmed by the Bethel City Council. I further understand that this application is public information and the merits of my appointment may be discussed at a public forum. In addition, my name may be published in a newspaper or other media outlet.

I have read Chapter 2.05 of the Bethel Municipal Code regarding Responsibilities of city council members, municipal officers, appointed officials and employees-conflict of interest. I agree to comply with the code and understand that my tenure as a commission/committee member requires such compliance.

I certify that the information in this application is true and accurate.

Signature of Applicant:

Date:

FOR OFFICE USE ONLY

Date Received:

Date of Council Approval:

Action Memorandum Number:

Date Applicant Notified:

Term Expiration: