



Neighborhood Advisory Council (NAC)

APPLICATION FOR APPOINTMENT

Note: Your application will be copied for the City Commission and made available to the press and public

I am seeking to fill an unexpired term on the Council.

Name: _____

Home Address: _____

Home/Cell Phone: _____

Current Occupation: _____

Work Address: _____

Work Telephone: _____

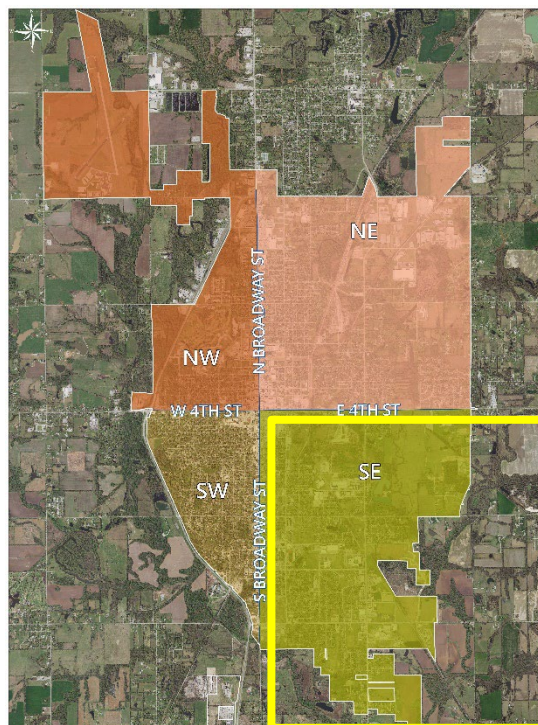
E-mail: _____

Are you a resident of Pittsburg? _____

If yes, how long have you lived in Pittsburg: _____

Do you: Rent _____ Own _____

This Application is for representatives living in the **Southeast Quadrant** (South of 4th Street, and East of Broadway Street). See map for quadrant boundaries.



Previous Committee/Commission Experience:

Education/Experience: A resume may be attached containing this and any other information that would be helpful in evaluating your application.

Professional and/or community service activities:

Please explain your reasons for wishing to serve on this council and how you feel that you may contribute:

Area of interest (please check any/all that may apply):

- | | | |
|---|--|---|
| <input type="checkbox"/> Volunteerism | <input type="checkbox"/> Public Policy | <input type="checkbox"/> Communication |
| <input type="checkbox"/> Clean Up Efforts | <input type="checkbox"/> Neighborhood Coordination | <input type="checkbox"/> Event Planning |

The Neighborhood Advisory Council meets at Memorial Auditorium at 12:00 pm on the first Wednesday of each month. Appointment to this position may require you to file a Conflict of Interest Disclosure Statement, which is a public record.

Signature of Applicant: _____

Date: _____

If you have any questions regarding the appointment procedure, please contact the City Clerk by phone at (620) 230-5532 or by email at tammy.nagel@pittks.org.

Please return your completed application to:
City of Pittsburg
Attn: City Clerk
PO Box 688
Pittsburg, KS 66762