

## **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 Cou	uncil.
Name:	
Home Address:	
Home/Cell Phone:	
Current Occupation:	
Work Address:	
Work Telephone:	
E-mail:	
Are you a resident of Pittsburg?	* 1
If yes, how long have you lived in Pittsburg:	
Do you: Rent Own	門子以
This application is for those living in the <b>Northeast Quadrant</b> <u>or</u> the <b>Southeast Quadrant</b> of the city. Select the quadrant you represent:	NW BROADWAY ST
Northeast Quadrant (North of 4 <sup>th</sup> Street and East of Broadway Street)	W 4TH ST E 4TH ST SE
Southeast Quadrant (South of 4th Street and East of Broadway Street)	S. Bicotow
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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 an	d how you feel that you may	
contribute:		
Area of interest (please check any/all that may apply):		
Volunteerism Public Policy	Communication	
Clean Up Efforts Neighborhood Coordination	Event Planning	
The Neighborhood Advisory Council meets at Memorial Auditoriu Wednesday of each month. Appointment to this position may re Interest Disclosure Statement, which is a public record.	•	
Signature of Applicant:	<del> </del>	
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 <a href="mailto:tammy.nagel@pittks.org">tammy.nagel@pittks.org</a>.

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