



# ADVISORY COMMITTEE APPLICATION FORM

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Committee(s) interested in:

Public Works:

Parks & Recreation:

Economic Development:

Tell us why you would like to be included on the Committee(s) of your choice and what you will contribute:


Please list any education, prior experience, volunteering opportunities, or any other information that would indicate how you would contribute to the Committee(s):


*By submitting this application, I am asking the City to consider my participation in the City Advisory Committee(s) I selected. If asked to serve, I will do my best to attend committee meetings, participate in discussion, and help advise the Committee on the best course of action.*

This application may also be printed and emailed to [cityhall@monroeoregon.gov](mailto:cityhall@monroeoregon.gov) or mailed / dropped off at Monroe City Hall, 664 Commercial Street, Monroe, OR 97456. Questions? Please email or call 541-847-5175.