



Application for Appointment to City Boards and Commissions

Name of Board or Commission to which you are applying:

- Library Board Trustees
- Parks and Recreation Commission
- Planning and Zoning Commission/Board of Adjustment

Name: _____
(Title) (Last) (First) (Middle)

Residence Address: _____
(Street) (City) (State) (Zip)

Mailing Address: (If different from above)

(Street) (City) (State) (Zip)

Preferred Phone and Fax: _____
(Phone) (Fax)

Email Address: _____

Occupation: _____

Employer: _____

Are you a registered voter in the City? Yes No

Are you a resident of the City? Yes No Length of residency: _____

Do you, your spouse or your employer have any financial interest, directly or indirectly, in matters that might come before the Board and Commission to which you seek appointment?

Yes No If yes, explain: _____

Do you, your spouse or your employer have any financial interest, directly or indirectly, in the sale to the City of any land, materials, supplies or service?

Yes No If yes, explain: _____

Convictions: Have you ever been convicted of violating any federal, state or municipal law, regulation or ordinance? Yes No If yes, give details. Do not include traffic violations.

Name: _____

BACKGROUND

Education: ___ High School ___ College - Course Study: _____

___ Other - explain _____

Professional: _____

Areas of Interest: _____

Position and Dates of Volunteer Experience/Community Service:

Please specify membership and give title and dates, and/or employment with all Boards, Commissions, Corporations, Non-Profit Entities, Agencies, or other Entities on any other government Board or Commission that you have held. Additional information may be attached.

Organization: _____

Title: _____ Dates: _____

Organization: _____

Title: _____ Dates: _____

Reasons for seeking appointment: Please attach a brief narrative outlining your interests and qualifications for seeking appointment. You may also add a resume or additional information.

I have read and understand the instructions and appointment process. I certify that all statements that I have made on this application and other supplementary materials are true and correct. I hereby authorize the City of Deer Park to investigate the accuracy of this information from any person or organization, and I release the City of Deer Park and all persons and organizations from all claims and liabilities arising from such investigation or the supplying of information for such investigation. I acknowledge that any false statement or misrepresentation on this application or supplementary materials will be cause for refusal of appointment or immediate dismissal at any time during the period of my appointment.

Signature

Date



Consent for Felony Background History Authorization/Waiver/Indemnity Form

Each volunteer applicant who is to be screened must sign a consent for felony background history authorization/waiver/indemnity form, giving approval for the City of Deer Park to perform a felony background search.

I authorize any duly authorized agent of the City of Deer Park to conduct a review of and obtain full disclosure of all records relating to my felony background record, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudication. I understand that this information will be used in part to determine my eligibility for a volunteer position with the City of Deer Park. I also understand that as long as I remain a volunteer with the City of Deer Park, the felony background check may be repeated at anytime. I understand that I will have an opportunity to review the background and a procedure is available for clarification, if I dispute the record received.

I, the undersigned, do, for myself, my heirs, my executors and administrators, hereby remise, release and forever discharge and agree to indemnify the City of Deer Park and each of their officers, directors, employees and agents harmless from and against any and all causes of actions, suits, liabilities, costs debts and sums of money, claims and demands whatsoever, and any and all related attorney's fees, court costs and other expenses resulting from the investigation of my background in connection with my application to become a volunteer.

Applicant Name: _____

Applicant Address: _____

Date of Birth _____

Social Security # _____

Driver's License Number _____

State of Issue _____

Signature

Date

Subscribed and sworn to before me, by the said _____,
this _____ day of _____, 20____ to certify which witness my hand and seal of
office.

Notary Public in and For Harris County, Texas

S E A L

FILE COMPLETED APPLICATION FORM WITH CITY SECRETARY'S OFFICE BY DEADLINE
City of Deer Park - City Secretary Department - P. O. Box 700 - Deer Park, Texas 77536
(Original copy will be on file in the City Secretary's office for 12 months)