



Advisory Commission Application

Date _____

General Information

Name _____
Last First M.I.

Address _____

City, State, Zip _____

Phone _____
Home Business Cell

Email Address _____

Commission/Task Force

_____ Economic Development Commission

_____ Planning Commission

_____ Parks, Rec. & Environmental Commission

_____ Public Safety Commission

Availability (Check all Preferences)

_____ After work, early evening _____ Evening, after supper _____ Early morning

List specific days or times you are not available _____

Personal Information

List any related work/education experience:

List any civic, professional and/or community activity involvement:

Why do you want to be on a commission?

What skills, strengths, or abilities do you believe you can add?

Additional comments:

References:

1.

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Name	Address	Phone Number
2.

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Name	Address	Phone Number
3.

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Name	Address	Phone Number

Please submit a **letter of interest** and your **resume** along with **this completed form** to:

Terri Haarstad, City Clerk
City of New Brighton
803 Old Highway 8 NW
New Brighton, MN 55112

Email: terri.haarstad@newbrightonmn.gov
Phone: 651-638-2045 Fax: 651-638-2044

Deadline: February 7, 2017