CITY OF LEONARD, TEXAS Boards, Commissions and Committees Application

Please print or type answers to all questions. Write N/A if not applicable.

Public service opportunities are offered by the City of Leonard without regard to race, color, national origin, religion, sex or disability. To be eligible for appointment to a Board, Commission or Committee, a candidate must be a qualified voter in Leonard and a resident of Leonard and/or Fannin County for one year prior to filing.

Please select one Board, Commission or Committee and one Alternate Board, Commission or Committee. (Please note: You may only list those boards/commissions/committees that we currently have vacancies for.) Board, Commission or Committee ______ Alternate Board, Commission or Committee Applicant Name: _____ M.I. Last 2. Home address: ______ Mailing Address (if different from home address) 3. Telephone Number: (Home) _____ (Work) ____ (Cell) _____ 4. Primary Email address (this is our main source of contact to you) Preferred method of contact: 5. Do you currently reside in Leonard? Yes □ No □ 6. How long have you been a resident of Leonard? 7. Are you eligible to vote in Leonard (see criteria below) Yes \square No \square • Be a U.S. Citizen Be a resident of the City of Leonard/Fannin County Be 18 vears old Not a convicted Felon (unless a person's sentence is completed; including any probation or parole) Not declared mentally incapacitated by a court of law. 8. Are you currently serving on a City of Leonard Board, Commission or Committee? Yes \(\sigma\) No \(\sigma\) If yes, which one? _____ Term expires: _____ 9. Have you ever served on a City of Leonard Board, Commission or Committee? Yes \square No \square If yes, list name of Board, Commission or Committee and term of office:

(over)

10. Do you have any relatives or members of your household City of Leonard? Yes □ No □ If yes, please list names and relationships:	serving as an elected or appointed official of the
11. Are any relatives of your household employed by the City12. Please read the Code of Ethics on the City's website before	
 a. Do you understand and agree to adhere to the code o b. Do you understand the term length for the position you members? Yes \(\sqrt{\sq}}}}}}}\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}\signt{\sqrt{\sq}}\sinthintet{\sint{\sinty}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	
 c. Do you understand that it is very important that you at commission or committee you have applied for and the Yes \(\Bar{\text{No}} \) No \(\Bar{\text{No}} \) 	
Any member of a board, commission or committee who meetings, or twenty-five (25) percent of regularly scheen month) period immediately preceding and including the acceptable or a majority of the other members shall forfer committee.	duled meetings during the twelve-month (12- ne absence in question, without explanation
13. Do you have any physical or mental constraints which may	/ limit your ability to perform the duties of a board
member or commissioner? Yes 🗆 No 🗆	
If yes, what can be done to accommodate these constrain Pursuant to the Americans with Disabilities Act, the City of accommodate persons with qualified disabilities during the process. If you require special accommodation, please co (5) days in advance of any scheduled interview.	Leonard will make reasonable efforts to Board, Commissions and Committees interview
•	
14. List any relative educations, training or experience:	
· · · · · · · · · · · · · · · · · · ·	
15. List your current or last employer:	
Name:	
Address:	
Date(s) of employment:	Phone No.:
Job Duties:	
I certify that all statements that I have made on this application and correct. I hereby authorize the City of Leonard to investig person or organization, and I release the City of Leonard and I liabilities arising from such investigation or the supplying of infinitial any false statement of misrepresentation on this application refusal of appointment or immediate dismissal at any time during	ate the accuracy of this information from any all persons and organizations from all claims and ormation for such investigation. I acknowledge on or supplementary materials will be cause for
Signature of Applicant	Date

CITY OF LEONARD	§					
STATE OF TEXAS	§					
COUNTY OF FANNIN	§					
Before me, the undersigned	ed authority, on this day p	ersonally appeared:				
		, who, after				
being duly sworn, on His/h	ler oath stated as follows	:				
"My name is			lam eigl	nteen (1	18) years (of age
or older. I have never bee statements contained in the	<u>₹</u>		•			The
1. I was born in		-	on	/	/20	_•
2. My residential addr	ess is					
3. My mailing address	is (if different from resid	ential address)				_•
4. My Driver's License	No. or Person ID No					
5. I currently reside w	ithin the city limits of the	City of Leonard, Texas a	ınd have bee	n residi	ing within	the
city limits of the Cit	y of Leonard, Texas since	e/	_·			
Further Affidavit sayeth no	• " ·					
		Signature	e of Applican	ıt	· · <u>-</u>	
SUBSCRIBED AND SWO	RN TO BEFORE ME by t	he said				-
	on this the	day of	· · · · · · · · · · · · · · · · · · ·			-
		Notary Public in	and for the S	State of	Texas	

Leonard 1-2016