City of Goodyear
APPLICATION FOR BOARDS AND COMMISSIONS

Name of Board or Commission* _____

Due to residency requirements for some boards/commissions, we require that you provide your home address.

PERSONAL INFORMATION

Name:* _____
Street Address:* _____
City, State, Zip Code:* _____
Neighborhood:* _____
Phone Number:* _____
Email Address:* _____
Length of residency in Goodyear:* _____
Age Bracket:* ○ Youth under 21 ○ Adult 40-60 years
○ Adult 21-39 years ○ Adult over 60 years
Have you ever attended the Citizen Academy?* ○ Yes ○ No
Do you have any relatives employed by the City of Goodyear?* ○ Yes ○ No
Are you now, or have you ever served on a municipal board, commission or committee?* ○ Yes ○ No
If 'Yes' please give the name of the board, commission or committee and dates served.

EDUCATION

Highest Grade Complete:* _____
Name of School, College or University Attended:* _____
Type of Degree:* _____
Year Graduated:* _____

MOST RECENT EMPLOYMENT HISTORY

Employer's Name:* _____
Employer's Address:* _____
Employer's City, State, Zip Code:* _____
Employer's Phone:* _____
Title:* _____
Employment Period:* _____

Employer's Name: _____
Employer's Address: _____
Employer's City, State, Zip Code: _____
Employer's Phone: _____
Title: _____
Employment Period: _____

Why are you interested in becoming a member of this board or commission?*

OPTIONAL INFORMATION

The Mayor and Council are committed to ensuring that membership of boards and commissions reflect the diversity of the Goodyear Community. In order to ensure that we are successful in this effort, providing this optional information will be helpful.

Sex: ○ Male ○ Female

Ethnicity: ○ Hispanic ○ Asian/Pacific Islander
○ Black ○ American Indian/Alaskan Native
○ White

Year of Birth: _____

I understand that I must submit my resume along with my application.*

Approval to do a background check:* ○ Yes ○ No

By submitting this application, I understand that a basic background check may be conducted and I will be fingerprinted. I hereby release the City from liability or damage which may result from furnishing the information requested. I understand that falsifying statements on this application or during the interview process is cause for my immediate dismissal from the Commission/Board.

You may be required to provide additional information.
Please note all materials submitted are subject to public records law.
Applications will be kept on file for one year.

* indicates required fields.

_____ _____
Signature Date

Please return this form as follows:	Mail or drop off:	City Clerk's Office Goodyear City Hall 190 N. Litchfield Rd. Goodyear, AZ 85338
	Fax to:	623-882-7832

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