

Date:

City of Aurora
APPLICATION FOR APPOINTMENT
PLEASE TYPE OR PRINT CLEARLY

Ward No.

Application kept for One Year. May Attach Resume.

Board/Commission Applying For: **Veterans' Affairs Commission** **DD214 #**

PERSONAL INFORMATION:

Name:		How long in Aurora:	
Home Address:		Zip:	Registered to Vote:
e-mail address:	**Date of Birth:	Home Phone:	Work Phone:

EDUCATION: ****Required to verify voter registration**

Yrs. Completed:	Degree(s):
Colleges:	

EMPLOYMENT:

Employer Name/Address:	Position:	How long?
Work Experience:	Certifications:	

COMMUNITY INVOLVEMENT:

DO YOU PRESENTLY SERVE IN ANY OTHER APPOINTED POSITION ON A BOARD, COMMISSION OR COMMITTEE? Yes No

If yes, what position:

INTERESTS/ACTIVITIES:

WHY DO YOU DESIRE THIS APPOINTMENT:

How much time do you anticipate being able to spend on this appointment each month?

PLEASE GIVE THREE REFERENCES:

Name:	Address:	Phone:
Name:	Address:	Phone:
Name:	Address:	Phone:

I certify that the foregoing information is true and correct.

(Volunteer's name printed)

(Volunteer's signature)

(Date)

SEND COMPLETED FORM TO:
CITY CLERK'S OFFICE, 15151 E. Alameda Parkway, Suite 1400, Aurora, CO 80012
PHONE: 303.739.7094 FAX: 303.739.7520.

(-OVER-)

How did you hear about us:

- Newspaper: _____
- News Aurora (water bill newsletter)
- Channel 8
- Word of Mouth
- Other: _____

FOR OFFICE USE ONLY:

Date Received: _____ Excel Entry Date: _____ Initials: _____	Registered Voter: ___ Yes ___ No ___ N/A County: As of: _____ Volunteer Agreement Signed?: ___ Yes ___ No Incumbent? ___ Renewal Letter Attached? ___ New Volunteer Agreement? ___
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Date Interviewed:	Comments:	Appointed?
Date Postcard Sent:	Response:	
Date Postcard Sent:	Response:	