



Application For Boards, Committees, Commission & Work Groups

Office of the Borough Clerk

710 Mill Bay Road, Room 234

Kodiak, AK 99615

Phone: (907) 486-9310

Fax: (907) 486-9391

clerks@kodiakak.us

Please be aware that the information given on your application is made available to the public. Staff will require the use of a mailing address, email address, and contact phone number to provide board and meeting information. The Information on this form will also provide the basic information to the Mayor and Assembly Members on your interest in serving on the selected Board, Committee, Commission, or Work Group.

Applicant Information

Full Name: _____

Physical Address Where you Claim Residency: _____

Mailing Address: _____

Phone Number(s): _____

Email Address(s): _____

Employer/Occupation: _____

Check the Board, Committee, Commission, or Work Group for which you are applying:

- | | |
|---|---|
| <input type="checkbox"/> Architectural/Engineering Review Board | <input type="checkbox"/> Bay View Road Service Area |
| <input type="checkbox"/> Citizens Board of Equalization | <input type="checkbox"/> Fire Protection Area No. 1 |
| <input type="checkbox"/> Kodiak Fisheries Development Association | <input type="checkbox"/> Monashka Bay Road Service Area |
| <input type="checkbox"/> Kodiak Fisheries Work Group | <input type="checkbox"/> Mission Lake "Tide Gate" Service Area |
| <input type="checkbox"/> Parks and Recreation Committee | <input type="checkbox"/> Service Area No. 1 |
| <input type="checkbox"/> Planning and Zoning Commission* | <input type="checkbox"/> Trinity Island Street Light Service Area |
| <input type="checkbox"/> Solid Waste Advisory Board | <input type="checkbox"/> Womens Bay Service Area Board |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Woodland Acres Street Light Service Area |

Please Answer the Following

Are you a Borough Resident? Yes No If yes, for how long? _____

Are you a registered voter? Yes No

(Planning and Zoning Commissioners, once appointed, will be required to fill out APOC Financial Disclosure Forms)

Are you willing to file APOC financial Disclosure forms? Yes No

Background Information

Please list any current memberships or organization(s) you belong to or participate in:

What background, special training, education, experience, or credentials do you possess and will bring to your selection(s):

Why are you interested in serving on the selected Board, Committee, Commission, or Work Group? Explain your main reason for applying. This may include information on future goals or projects you wish to see accomplished or any additional information that may assist the Mayor and Assembly in the decision-making process. You may attach an additional page if needed:

A resume or letter of interest may be attached but is not required.

- STAFF USE ONLY -

Registered voter of the Borough: Yes No **Resident of the Service Area:** Yes No

Date Received:

Date Provided to Mayor or Assembly: