

**CITY OF BURKBURNETT  
VOLUNTEER APPLICATION  
FOR BOARDS, COMMISSIONS OR COMMITTEES**

**DATE:**

(Applications retained for 12 months)

<b>Full Name:</b>		<b>First</b>	<b>Middle</b>	<b>Last</b>	<b>Maiden (if applicable):</b>
<b>Address:</b>			<b>E-mail Address:</b>		
<b>Date of Birth:</b>		<b>Social Security # (not mandatory):</b>		<b>Home Phone:</b>	
<b>Spouse's Name:</b>				<b>Work Phone:</b>	
<b># of Children:</b>		<b>Years Residing in Burkburnett</b>		<b>Other Cities Lived In:</b>	
<b>High School Name:</b>				<b>Location:</b>	
<b>College Information:</b>					
	<b>Name of College(s)</b>	<b>Location</b>	<b>Degree</b>	<b>Date Degree Received</b>	
1.					
2.					
3.					
<b>Occupation:</b>			<b>Employer:</b>		
<b>Employer's Address:</b> (City, State, Zip)					
<b>Professional Associations/Organizations:</b>					
<b>Previous &amp; Current Community Service:</b> (Memberships, Offices held, etc.)					
<b>Hobbies/Interests:</b>					
<b>Clubs &amp; Organizations:</b>					
<b>Selection of Boards (Indicate first, second, third and fourth choices for board memberships by placing a number in space adjacent to the board's name)</b>					
_____ Cemetery Board		_____ Parks/Recreation		_____ TIF	
_____ Golf Committee		_____ Planning & Zoning		_____ Zoning Board of Adjustments	
_____ Burkburnett Develop. Corp.					
<b>Are you registered to vote in Wichita County?</b> ___ Yes      ___ No					
<b>Please explain why you want to serve on the boards listed above and/or your qualifications:</b>					

By executing this document, the applicant does hereby certify and affirm the truth and accuracy of the information contained herein. The applicant further authorizes the Board of Commissioners, or its designee, to verify any information. The applicant agrees to release and hold harmless the City from all claims incident to the verification of information contained herein.

Please return this application to:

Janelle Dolan, City Clerk  
City of Burkburnett  
501 Sheppard Road  
Burkburnett, TX 76354  
(940)569-2263  
(940)569-4192 fax  
jdolan@burkburnett.org

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Signature of Applicant