

# City Application Form

Date \_\_\_\_\_

## General Information

Name \_\_\_\_\_  
Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, ZIP \_\_\_\_\_  
Phone Numbers Home \_\_\_\_\_ Work \_\_\_\_\_  
Fax \_\_\_\_\_ Fax \_\_\_\_\_  
Email Address \_\_\_\_\_

## Committees

If you wish to be considered for more than one committee or function, please order in number of preference.

_____ Planning Commission	_____ Police Commission
_____ Library Board	_____ Economic Development Authority
_____ Airport	_____ Housing & Redevelopment Auth.
_____ Charter Commission	_____ City Council
_____ Liquor Store	_____ Community Center Work Group
	_____ Park Committee

## Special Interests

As the Council prioritizes its goals, it may create additional/new committees or task forces from time to time. If you have other specific areas or topics of interest please indicate those interests and we will retain your application for future openings in those areas as new committees are created.

Other Interests \_\_\_\_\_

## Personal Information

List your work experience.

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**List any Civic, Professional, and Community Activity involvement.**

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**Why do you want to be on the City Council, a board or commission?**

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**What skills, strengths, or abilities do you believe you will add?**

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**List any additional comments.**

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**References: OPTIONAL**

1.	_____	_____	_____
	Name	Address	Phone No.
2.	_____	_____	_____
	Name	Address	Phone No.
3.	_____	_____	_____
	Name	Address	Phone No.

Please return this form to:

**Attn: Diane Campbell**  
City of Tracy  
336 Morgan Street  
Tracy, MN 56175

Phone: (507) 629-5528  
Fax: (507) 629-5530  
dcampbell@tracymn.org