City of Kalama



Application for City of Kalama Civil Service Commission

PO Box 1007 | Kalama, WA 98625 | 360.673.4561 | Fax 360.673.4560

Name			
Physical Address			Home Phone
			Work Phone
Mailing Address (if different)			Email Address
Please indicate your current occupation:			
Are you available for Day □ or Night □ Meetings or Both □			
What is your interest/objective in serving on the Kalama Civil Service Commission?			
What previous experience do you have serving on a board, commission, or committee?			
Additional information, special skills or interests:			
With respect to Civil Service Commission members, the Revised Code of the State of Washington states in part:			
"No person shall be appointed a member of such commission who is not a citizen of the United States, a resident of such city for at least three years immediately preceding such appointment, and an elector of the county wherein he residesAt the time of any appointment not more than two commissioners shall be adherents of the same political party." RCW 41.12.030.			
	Are you a registered voter of Cowlitz County?	How long have you been a resident of Kalama?	What is your Political Party affiliation?
Yes □ No □	Yes □ No □	TAIGITIG :	
Additional information or a resume may be submitted with this application			
Signature		Da	te: