



BOARD/COMMISSION REAPPOINTMENT APPLICATION

APPLICANT INFORMATION

Date:					
First Name:		Middle:		Last Name:	
Address:			City:		State:
Phone:	Work:	Email: (optional- *see note below)		Zip:	

I am currently a member of the (CHECK THE BOX OF THE BOARD/COMMISSION THAT YOU ARE CURRENTLY SERVING ON)
and wish to reapply for membership for another term:

- Board of Adjustment**
- Planning and Zoning Commission**
- Library Board**
- Economic Development Corporation**
- Other**

Authorization and Release

I hereby request consideration for reappointment to the above Board or Commission of the City of Lake Worth, Texas. I affirm that all the information contained in this reapplication is true and correct and that any misrepresentation, falsification, or omission shall be cause for relinquishing my role as a volunteer for the City of Lake Worth. *Furthermore, I acknowledge that if I chose to submit a personal e-mail on this application, I hereby authorize release of such in the event there is a public information request for my application.

Upon completion, please return this form to: Linda Rhodes, City Secretary at City of Lake Worth, 3805 Adam Grubb, Lake Worth, Texas 76135

Applicant Signature:	Date:
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OFFICE USE	
Received by City Secretary:	Date: