

TOWN OF LOOMIS

Application for Membership to Advisory Board or Commission

PLEASE PRINT OR TYPE

I am applying for membersh	hip on the		
If this Board/Commission/Co	mmittee calls for a spec	ific type member (such as parent member,	provider member,
etc.), please indicate for w	hich position you are a	pplying,	
Do you live within the limits	of the Town of Loomis?		
Filing deadline:			
Name:			
Residence address:			
Mailing Address:			
Phone Number (s)	Home:	Business:	
Time available (days, eve	enings, etc.}:		
Employment Experience:_			
Organization and Communi	ty Experience:		
Other experience which you believe would be helpful to bring to the attention of the Town Council in making this appoint:			
арропп. <u> </u>			
Education (include high sch	and college and/or univ	ersity, and graduate study):,	
Ludcation (include high scr	looi, college and/or unive	ersity, and graduate study).,	
Other training:			
Resume containing other poyour application. Please at		ut yourself would be helpful to the Town Cou	uncil in evaluating
Date		Signature of Applicant	
Dato		9	