



APPLICATION FOR CITY COUNCIL/CHARTER COMMISSION

NAME: _____ DATE: _____

HOME ADDRESS: _____

MAILING ADDRESS: _____

REGISTERED VOTER: YES _____ NO _____ DATE OF BIRTH: _____
(City Council/Charter Commission require members to be qualified electors.)

TELEPHONE: (Residence) _____ (Employment) _____

E-MAIL ADDRESS _____

OCCUPATION: (If retired, indicate former occupation or profession.)

PROFESSIONAL AND/OR COMMUNITY ACTIVITIES: _____

PLEASE REVIEW THE CITY'S CODE OF ORDINANCES FOR QUALIFICATIONS TO SERVE ON THE CITY COUNCIL OR CHARTER COMMISSION. INDICATE WITH A CHECK MARK THE CITY COUNCIL OR CITY CHARTER COMMISSION POSITION IN WHICH YOU ARE INTERESTED IN SERVING:

CITY COUNCIL (WARD _____) _____ CITY CHARTER COMMISSION _____

BOARDS/COMMISSIONS YOU HAVE PREVIOUSLY SERVED:

Board/Commission

Dates Served

RETURN COMPLETED FORM TO:

MINERAL WELLS CITY CLERK

P.O. BOX 460

MINERAL WELLS, TX 76068

cyclerk@mineralwellstx.gov

Phone: 940-328-7702 Fax: 940-328-7704

FOR OFFICE USE ONLY

APPT. TO _____

DATE _____

OPEN GOV'T _____

TERMED _____

DESTROY _____

* If encountering problems with emailing this document, please print and submit directly to the City Clerk at the address above.