

Please Type or use Black Ink

Date _____

PUBLIC SERVICE APPLICATION
Columbia, Missouri

Name: _____
First Middle Last

Address: _____
Number Street Zip Code

Phone (Home): _____ Phone (Cell): _____

E-Mail Address: _____

Do you live within the city limits of Columbia? Yes _____ No _____ If Yes, give Ward: _____

Are you a registered voter? Yes _____ No _____

1. Board or Commission applying for: _____

If applicable, category applying for (i.e. layperson, artist, nurse, etc.): _____

2. Current Employer: _____ Phone (Office): _____

Position/Title: _____ Product/service rendered by employer: _____

[Note, if retired, a homemaker, a student, unemployed, etc., please indicate. Also, if you are retired or unemployed, please indicate previous place of employment, if any, and if you are a student, please indicate the high school, college, etc. you currently attend. This information is requested to ensure there is not a conflict of interest and/or to ensure a particular requirement is met when applicable.]

3. Current community service, to include other Boards or Commissions on which you currently serve:

4. Past community service: _____

5. Why do you wish to serve on this Board or Commission? _____

6. What experience or qualifications do you have relating to the function of this Board or Commission?

7. Provide a brief statement on your philosophy/thoughts on diversity, equity, and inclusion and how each plays a role with the respective Board or Commission for which you are applying:

8. Do you have any monetary interest, direct or indirect, in any pending or incomplete transaction or contract to which the City is, or is to be, a party? Yes _____ No _____

9. Does any family member have any monetary interest, direct or indirect, in any pending or incomplete transaction or contract to which the City is, or is to be, a party? Yes _____ No _____

If you answered yes to questions 8 and/or 9, please explain: _____

10. Other information or comments: _____

11. Have you read the duties and responsibilities of the Board or Commission for which you are applying?

Yes No

12. References (List 2):

NAME

ADDRESS

PHONE NUMBER

13. How did you hear about this

Newspaper Ad _____

City of Columbia Website _____

Newsletter that comes with City Utility Bill _____

Other _____

14. Optional Self-Identification: The City of Columbia and the City Council affirm all of the dignity rights and seek to have diverse representation on boards and commissions. As a means to improve efforts with diversity on city boards and commissions, you are asked to complete these optional self-identification questions. Completion of all of the following questions regarding gender, sexual orientation, age, veteran status, disability, and race/ethnicity is completely voluntary and will not affect your ability to sit on a board or commission.

Gender: Check all that apply.

- ☐ Female
- ☐ Male
- ☐ Non-binary
- ☐ Transgender
- ☐ An identity not listed. Please specify: _____
- ☐ I do not wish to disclose

Sexual Orientation: Check all that apply.

- ☐ Asexual
- ☐ Bisexual
- ☐ Gay
- ☐ Straight (Heterosexual)
- ☐ Lesbian
- ☐ Pansexual
- ☐ Queer
- ☐ Questioning or unsure
- ☐ Same-gender loving
- ☐ An identity not listed. Please specify: _____
- ☐ I do not wish to disclose

Age: Check one.

- ☐ Less than 25 years old
- ☐ 26-30 years old
- ☐ 31-35 years old
- ☐ 36-40 years old
- ☐ 41-45 years old
- ☐ 46-50 years old
- ☐ 51-55 years old
- ☐ 56-60 years old
- ☐ 61-65 years old
- ☐ More than 65 years old
- ☐ I do not wish to disclose

Veteran Status: Check one.

- ☐ Yes
- ☐ No
- ☐ I do not wish to disclose

Disability: Check one.

Under the American with Disabilities Act (ADA), a “disability” is a physical or mental impairment that substantially limits one or more major life activities of the individual.

- ☐ Yes, I have an ADA disability
☐ No, I do not have an ADA disability
☐ I do not wish to disclose

Race/Ethnicity: Check one of the descriptions below corresponding to the group with which you identify.

- ☐ Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race
- ☐ White (Not Hispanic or Latino): A person having origins in any of the original peoples of Europe, the Middle East or North Africa
- ☐ Black or African American (Not Hispanic or Latino): A person having origins in any of the black racial groups of Africa
- ☐ Native Hawaiian or Pacific Islander (Not Hispanic or Latino): A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- ☐ Asian (Not Hispanic or Latino): A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
- ☐ Native American or Alaska Native (Not Hispanic or Latino): A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment
- ☐ Two or more races (Not Hispanic or Latino): All persons who identify with more than one of the above five races
- ☐ I do not wish to disclose

Signature of Applicant

RETURN APPLICATION TO:

City of Columbia
City Clerk's Office
P.O. Box 6015
Columbia, MO 65205-6015

By submitting this form, you affirm that the information contained in this application is true and accurate to the best of your knowledge and that you are the person named in the applicant section of this form. In addition, you acknowledge that upon receipt by the City, this form is a public record and its contents will be provided to anyone requesting a copy and that your name, street number/address, and ward will be made available to the public via the council meeting agenda, which is posted on the internet.

NOTE: You may attach your resume or other information.