



APPLICATION FOR BOARDS AND COMMISSIONS
OFFICE OF THE GOVERNOR

Full Name: (please print or type)

Mr. Mrs. Dr. Ms. (please circle one)

Spouse's Name: Address City, State, Zip

Mr. Mrs. Dr. Ms. Phone

Home: /

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Office: /

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Email Address:

Correspondence preference: Office Home

FAX () -

Date of Birth: / /

Place of Birth:

SS No:

Political Party Legislative District Referred by

Ethnicity (please check one) African-American Asian/Pacific Islander Caucasian Latino Native American Other Gender: Male Female

BOARDS/COMMISSIONS OF INTEREST (List according to preference)

- 1. 2. 3. 4. 5.

A list of current vacancies can be found at the Governor's website. http://www.governor.state.az.us

CURRENT EMPLOYMENT: (Title & Company/Agency)

EDUCATION: (Including degrees completed)

REFERENCES:

- 1. (Name) (Business/Company/Agency) (Phone Number) 2. 3.

AFFIRMATION OF ELIGIBILITY:

To your knowledge, have any formal charges of professional misconduct, criminal misdemeanor or a felony ever been filed against you in any jurisdiction?

Yes No If Yes, please attach explanation.

Is there any possible conflict of interest or other matter that would create problems or prevent you from fairly and impartially discharging your duties as an appointee of Governor Brewer? Or other information that would embarrass the governor?

Yes No If so, please attach explanation.

I certify that the facts contained in this application are true and correct to the best of my knowledge. I have reviewed the statutory requirements governing the board/commissions in which I have expressed an interest and confirm that I meet those requirements. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my qualifications and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damages that may result from furnishing the same to you.

SIGNATURE:

DATE:

PLEASE ATTACH RESUME