CITY OF BRISBANE
COMPLETE STREETS SAFETY COMMITTEE
APPLICATION

TO: HONORABLE MAYOR AND CITY COUNCIL

I am a resident of the City of Brisbane and am interested in being considered for appointment to the Complete Streets Safety Committee.

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

How long have you lived in Brisbane? _____

Occupation: _____

Employer's Name: _____

Present Position: _____ Length of Employment: _____

What community activities are you presently involved in, or have been in the past?

_____

_____

_____

_____

Please list any other background information (business, education, personal) that might be useful.

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_____

Why do you want to be a member of the above Committee?

What do you feel you could contribute to the Committee?

The Complete Streets Safety Committee meetings will be held on the 1st Wednesday of each month, beginning at 6:30 p.m. How much time do you envision being able to give to serving on the Committee? How often are you out of town? What other commitments might cause conflicts in your attendance at Committee meetings?

Date: _____ Signature: _____