
Please describe your motivation for serving on this board/commission. _____

Please describe what you know about this board/commission. _____

How did you hear about this board/commission? _____

Please provide two personal or professional references (include name and phone number):

1. _____
2. _____

Signature: _____ Date submitted: _____

Please submit the completed form by hand, mail, fax or email to:

*City Recorder's office
Civic Center – Fifth Floor
150 East Main Street
Hillsboro, OR 97123
503-681-6232 (fax)*

*For additional information, or to find out how to fill out an electronic copy of the application,
please call 503-681-6117.*