Boards and Commissions Application for Appointment



Select One of the Options Below

Planning & Zoning Old Town Historic District Board of Adjustment ParksOld Town CID Other: **Applicant Information** Full Name: _____ Date of Birth: ___/ / I am a resident of Cottleville Ward: o Ward 1 o Ward 2 Previous Address: Current Home Address: HomePhone: _____Cell Phone: _____ E-Mail Address: Current Employer: Current Occupation: **Education and General Qualifications** Educational background: Licenses held, if any:_____ Special skills, qualifications, or experience related to the sought position: Community/Organization or Affiliations to which you belong: List special areas of interest not reflected in job or education background: List real estate holdings in Cottleville by self & immediate family; including being purchased:

•	Why do you wish to serve on this Board or Commission:	

Additional Requested Information (check the appropriate box to answer)

Are you registered to vote in the City of Cottleville?	Yes	No
Are you a citizen of the United States?	Yes	No
Are you a Permanent Resident of the United States?	Yes	No
Have you been a resident of the state of Missouri for more than 1 year?	Yes	No
Have you ever been convicted of or pleaded guilty to a misdemeanor or felony other than a traffic violation?	Yes	No
If yes, please explain your answer:		
Have you ever had a professional/occupational license revoked or suspended, as a result of disciplinary action?	Yes	No
If yes, please explain your answer:		
Is there anything in your background that might become an embarrassment to you if it were to become public?	Yes	No
If yes, please explain your answer:		
Are you a current employee of the U.S. Government?	Yes	No
Are you a current employee of the City of Cottleville?	Yes	No
Are you or a family member currently serving on a Cottleville Board or Commission?	Yes	No
Have you ever served on a Board or Commission?	Yes	No
If yes, please explain your answer:		
Have you ever held an elected or appointed office position?	Yes	No
If yes, please explain your answer:		

A Missouri State Highway Patrol Criminal Record Check is required.

- Use the online MSHP MACHS Name Search Portal for an immediate record and remit your results with this application.
- This application will be cross referenced with the sexual offender registry.

I certify that the facts and declarations contained in this application are true and correct to the best of my knowledge. I further authorize investigation of all statements contained herein are personal references that I may include or later provide to obtain any and all pertinent information. I understand that providing false responses may be cause to remove me from service on a board or commission if appointed. A personal financial disclosure may be required annually. Any information on this application may be subject to disclosure pursuant to sunshine law. I understand as part of my appointment I may be required to attend training and failure to do so when requested could result in removal from such a position.

Applicant Signature X	D-4
Anniicant Signatiiro I	Date:

Return this signed and completed application to:

Cottleville City Hall

Attn: City Clerk

5490 Fifth Street

Cottleville, Mo 63304