

# APPLICATION FOR NOMINATION

*City of Hot Springs*

## Advisory Board, Commission, or Committee

Thank you for your interest in serving on one of the City of Hot Springs' Citizen Advisory Boards, Commissions and Committees. Volunteers such as you are what make our Advisory Boards, Commissions and Committees such a valuable asset to our local government.

Citizen Advisory groups perform a critical role by advising the City Board of Directors on important and complex issues. They are a structured way for individual citizens to share their opinions and perspectives, and formulate recommendations. Citizen advisory groups also:

- Provide assistance to the Board of Directors when formulating public policy by helping transform policy decisions into action.
- Address issues of interest or conduct background work on technical or politically sensitive issues.
- Serve as a way to build public consensus on controversial issues before elected officials make a decision.
- Gives the community a forum for discussion in greater depth than is possible than before a legislative body.
- Provide expertise without expending budget money.
- Assist in the resolution of conflicts.

As you read above, Citizens groups are very important and as such, volunteers placed on these Boards, Commissions and Committees should possess a strong interest in giving back to their community and be willing to contribute the hours necessary to make a difference. Members will be expected to:

- Study programs and services, and analyze problems and needs.
- Offer new proposals and recommend changes in programs, policies, and standards.
- Individual members, and the collective group, will be fair, impartial, and respectful of the public, staff and each other.
- Members will strive to appreciate differences in approach and pint of view, whether from each other, the community, the city board, or staff.

The City of Hot Springs appreciates your interest in serving on our Advisory Groups, and in order to make sure you are appointed to a committee that best serves your interests, we are now requiring that applicants attend at least one regular meeting of the Advisory group they are applying for. You may check the website or call the City Clerk's office to obtain the next meeting time of any Advisory Board, Commission or Committee. There is a place on the attached application to document the date of the meeting you attended.

We thank you again for your interest in making our community a stronger place to call home.

# APPLICATION FOR NOMINATION

I am applying for the following Board, Commission, or Committee:

\_\_\_\_\_ Date of Application: \_\_\_\_\_

Full Legal Name: \_\_\_\_\_

Voter Registration Number: \_\_\_\_\_

\*City Board District Residency (check one):

#1 #2 #3 #4 #5 #6  Outside of City

Home Address: \_\_\_\_\_  
Street City Zip

Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Business Name: \_\_\_\_\_  
Address City Zip

Business Phone Number: \_\_\_\_\_ E-Mail Address \_\_\_\_\_

*I have attended a regular meeting of the \_\_\_\_\_ Advisory Group held on*

*this date: \_\_\_\_\_ and at this location: \_\_\_\_\_*

**REASON FOR APPLYING:** Please describe your reason for applying for this specific advisory group, detailing any unique talents, experiences, or interests that would help make you an excellent member for this group. Also, include any particular goals you would like to see the advisory group achieve in the future.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SKILLS AND QUALIFICATIONS:** List any specific skills, abilities, and/or qualifications that are relevant to the Advisory Group for which you are applying.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EDUCATION:** Please describe your educational background including all degrees, technical training, certificates, etc that support your application to this Advisory Group.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COMMUNITY SERVICE and ACTIVITIES:** Please describe your community service activities:

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**ADDITIONAL COMMENTS:** Please use this space for any additional information you would like to share about yourself regarding your interest in serving on this advisory group:

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**FAMILY RELATIONSHIPS:** Do you have family members who are currently or were within the past two (2) years employed by the City of Hot Springs? If so, please list names, relationship to you, and the department in which they were employed.

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**BUSINESS RELATIONSHIPS:** Do you conduct any business with the City of Hot Springs? If so, please explain the nature of that business.

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**CRIMINAL HISTORY:** Have you ever been convicted of a felony?\_\_\_\_\_ If so, please provide the nature of the charge.

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**REFERENCES:** Please provide the names and phone numbers of three (3) references (other than relatives).

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

I, \_\_\_\_\_, certify that the above information is true and accurate to the  
(Print Name)  
best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*Please note that to be eligible for nomination for an Advisory Group, you must be a registered voter residing within the city limits, and in some cases, must reside within a specific board district of Hot Springs.

**PLEASE RETURN THIS FORM TO:** Office of the City Clerk, to the attention of Leigh Leaverton, City of Hot Springs, PO Box 700, Hot Springs, AR 71902. Or you may email this form to [lleaverton@cityhs.net](mailto:lleaverton@cityhs.net) . If you have any questions, please call (501) 321-6805.