



APPLICATION FOR APPOINTMENT TO BOARDS AND COMMISSIONS

Board or Commission Name: _____

Name: _____		
(Last)	(First)	(Middle)
Mailing Address: _____		
(Zip)		
Daytime Phone: _____	Alternate Phone: _____	
Employer: _____	Business Phone: _____	
Occupation/Position: _____	Fax Number: _____	
e-mail Address: _____		

The City of Buda recognizes and supports the concept of balanced representation in regard to filling vacancies on Boards and Commissions. To this end, every effort is made to appoint members who represent Buda's diverse community, including citizens of all ethnic groups as well as people with disabilities.

- In which geographic area of Buda do you reside? _____
- Are you a registered voter? **Yes** **No**
- Are you a City of Buda resident? **Yes** **No**
- Are you now or have you in the last three years registered/worked as a city lobbyist? **Yes** **No**

§ 8-16-4 of the City Code requires a person meeting the following criteria to register with the City Clerk as a registered lobbyist:

- (A) receives compensation of \$200 or more in a calendar quarter for lobbying;
- (B) receives reimbursement of \$200 or more in a calendar quarter to lobbying;
- (C) expends \$200 or more in a calendar quarter for lobbying; or
- (D) lobbies as the agent or employee of a person who:
 - (1) receives compensation of \$200 or more in a calendar quarter for lobbying;
 - (2) receives reimbursement of \$200 or more in a calendar quarter for lobbying;
 - (3) expends \$200 or more in a calendar quarter for lobbying.

- Do you or your employer have any business dealings with the City of Buda that might present a conflict of interest? **Yes** **No**
- Recognizing that serving on a Board or Commission is often time consuming, are you committed to attending all regularly scheduled meetings? **Yes** **No**

- Do you agree to complete any training necessary for the Board or Commission to which you are applying? Yes No

Describe any qualifications, expertise, or special interests that relate to your possible appointment, and any elaborations of your responses above.

It is suggested you submit a cover letter and resume with your application. Please return the original to the City of Buda City Clerk for processing.

Your application, which is public information under the Texas Open Records Act, will be kept on file for twelve (12) months.

*** ADA COMPLIANCE ***

Reasonable accommodations and equal access to communication are provided upon request.

Return to:
City Administrator
P.O. Box 1218, Buda, Texas 78610
Phone: (512) 295-6331
Fax: (512) 312-1889
e-mail tmilam@ci.buda.tx.us