



CITY OF FRUITA BOARDS AND COMMISSIONS MEMBERSHIP APPLICATION

BOARD OR COMMISSION	N: Downtown	Advisory Board	
NAME:	Justin Wear	ver	
MAILING ADDRESS:	762 Sabil D)r	
	City	State	Zip
RESIDENCE ADDRESS:	<u>Fruita</u>	CO	<u>81521</u>
PHONE NUMBER:	970250904	1	
	Home	Work	
E-MAIL ADDRESS:	justin.weaver022@gmail.com		
How long have you been a re	esident of Fruita?	2.5	
Occupation/Employer:		Copper Club Brewery	
List any volunteer and/or wo	rk experience:		
Are you presently serving on	a board or comm	ission? If so, which one(s)?	V
Why do you want to be a me To be more involved with the tow		d or commission?	
applying.		applicable to the board or commiss	

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Are you committed to attending meetings?
Are you committed to serving an entire term? Yes No
Please specify any activities which might create serious conflict of interest if you should be appointed to a particular board or commission. (If unsure, please call the City Manager's office at 858-3663)
List any licenses, certificates or other specialized training applicable to the board or commission for which you are applying.
Additional information or references you believe may be helpful in considering your application.
Donna Stratton, Mike Durden
Signature Date 9/8/21
All applicants are strongly encouraged to attend a regularly scheduled meeting of the board or commission for which they are applying. Frequent non-attendance may result in termination of the appointment.

ATTACHMENTS TO APPLICATION MUST BE LIMITED TO TWO PAGES

Please feel free to submit a resume along with this application. Application and any attachments should be returned to the Fruita City Council c/o the City Clerk, 325 E. Aspen, Fruita, CO 81521. Although we have indicated the best time to apply for a particular board, we accept applications for any of the boards year-round. Thank you.