



CITY OF FRUITA BOARDS AND COMMISSIONS MEMBERSHIP APPLICATION

BOARD OR COMMISSION	: Per	6 (AU)		
NAME:	MEL.	Mar	D.ER	······
MAILING ADDRESS:	983	E.P	FROR	ANE
	FRUS	rA.	0	81521
	City		State	Zip
RESIDENCE ADDRESS:		ME		·····
PHONE NUMBER:	8			
	Home		Work	
E-MAIL ADDRESS:				
How long have you been a re Occupation/Employer:	esident of Fruita?	Bon	OYRS	
List any volunteer and/or wo	rk experience:			
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Are you presently serving on a board or commission? If so, which one(s)?

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Why do you want to be a member of this board or commission?

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List any abilities, skills, or interests which are applicable to the board or commission for which you are applying.

ERVITA RESIDENT 1

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City of Fruita Boards and Commissions Application Page 2

Are you committed to attending meetings?

No

No

Are you committed to serving an entire term?

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)

🗹 Yes

NONE

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.

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Signature	1 In	and the second s	المتألية معري الم	· .	Date	8/8/24
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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.

2