



## APPLICATION FOR CITY BOARDS AND COMMISSIONS

Return to:  
City Administration Office  
420 N. Pokegama Avenue  
Grand Rapids, MN 55744  
218-326-7600

### Personal Information:

|                       |                           |
|-----------------------|---------------------------|
| Name: Dana Butler     | Date: 11/15/23            |
| Address: [REDACTED]   | Day Phone: [REDACTED]     |
| Employer: Self        | Evening Phone: [REDACTED] |
| Occupation: Therapist | E-Mail: [REDACTED]        |

Please rank in order the Boards/Commissions on which you would like to serve (leave blank any on which you do not wish to serve):

|   |   |
|---|---|
| <input type="checkbox"/> Arts & Culture Commission      | <input type="checkbox"/> Parks, Recreation & Civic Center Board     |
| <input type="checkbox"/> Economic Development Authority | <input type="checkbox"/> Planning Commission                        |
| <input type="checkbox"/> Golf Course Board              | <input checked="" type="checkbox"/> Police Community Advisory Board |
| <input type="checkbox"/> Human Rights Commission        | <input type="checkbox"/> Public Utilities Commission                |
| <input type="checkbox"/> Library Board                  |   |

Do you have special qualifications that you feel would help you be particularly effective on a City Board or Commission? (i.e. work experience, volunteer experience, education, hobbies, etc?) As a therapist I work a great deal with communities who have contact with police such as parents and children in CPS cases. I also do a great deal of mental health consultation in settings where LE are contacted for support.

How did you become interested in serving on a Board or Commission?

I served on the PCAB for a brief period of time earlier this year but had to step down due to health concerns. Those concerns have subsided and I am interested in ensuring our community is healthy.

Are you related to any City employee or elected official? YES ☐ NO ☒

If yes, to whom and how are you related? \_\_\_\_\_

Are you a Resident ☒ or Non-Resident ☐ ?

Do you own property or own a business within the Grand Rapids city limits?

YES ☒ NO ☐ If yes, please explain: I own a home and I own Embrace Mental Health

**Data Authorization:**

If appointed, I, Dana Butler, authorize the City of Grand Rapids to release the following private data upon request made to the City (check all that apply).

Home Phone # \_\_\_\_\_

Work Phone# [REDACTED]

Cell Phone # \_\_\_\_\_

I also authorize the City of Grand Rapids to release such authorized private data referenced above to members of the general public, City staff, Mayor and City Council members upon request for such data. The person(s) receiving such private data must use it only for lawful purposes.

This authorization shall be modified or cancelled only upon written notice to the City Clerk, City of Grand Rapids.

I agree to inform the City Clerk's office of any change indicated above.

I agree to relinquish and waive all claims that may arise against the City, its agents or employees for releasing any and all authorized data referenced above relating to this agreement.

I recognize and agree that I will be issued a City of Grand Rapids official email and will utilize it for official business of Boards & Commissions only.

11/15/23

Date



Signature