City Recorder's Office
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www.lebanonoregon.gov

COMMITTEES / COMMISSION APPLICATION

Applicant Information (Please type/print clearly):

Name: Don Robertson		Date: 04/16/2026
Home Address: [redacted]		
Mailing Address: same as above		
Home Phone: [redacted]	Email Address: [redacted]	Business Phone:
Occupation: Retired	Employer:	Emergency Contact Phone:

Preferred method of contact: ☐ Mail ☒ Phone ☒ Email

Please mark which one you are interested in serving on:

☐ *Ad Hoc Committee* _____ ☐ *Non-Election Council Vacancy*
(Print the Ad Hoc Committee Name)

☐ *Budget Committee* ☐ *Library Advisory Committee* ☐ *Parks, Trees & Trails Advisory Committee*
(Must be Registered Voter)

☒ *Planning Commission* ☐ *Senior & Disabled Services Advisory Committee*

Are you applying for reappointment: ☐ *Yes* ☐ *No* If so, how long did you serve in this capacity: ____ *Year(s)* ____ *Month(s)*

Describe experience **related** to position applying for:
I've served on the Planning Commission for over 25 years.

List current and/or previous involvement on any government boards/committees/commissions/councils:
Planning Commission and numerous related committees and task forces.

Explain why you are interested in serving in this capacity (attach additional sheet if needed):
I am renewing my appointment if Council approves.

Applicant's Signature [redacted] Date: 04/16/2026

FOR OFFICE USE ONLY

DATE RECEIVED: ____/____/____	*City Council Appointment Date:* ____/____/____
DATE SENT TO:	*Applicant Notification Date:* ____/____/____
Director: ____/____/____ *Mayor:* ____/____/____	*Term Start Date:* ____/____/____
Applicant Appointed: ☐ Yes ☐ No	*Term End Date:* ____/____/____

Print Form Reset Form