
From: no-reply@xpressformsbuilder.com
Sent: Tuesday, April 14, 2026 12:29 PM
To: City Recorder
Subject: Received response for form - Committee / Commission Application
Attachments: Committee__Commission_Application_20260414132912.pdf

Caution! This message was sent from outside your organization.

We have just received a new response for the form **Committee / Commission Application**.

Element Name	Response
Submitted On	2026-04-14 1:29:11
Name	Avery Shields
Date	04/14/2026
Home Address	
Mailing Address	
Home Phone	
Email Address	
Occupation	CNA/Recreation Assistant
Employer	Oregon Veterans Home - Lebanon
Business Phone	(541) 497-7265
Emergency Contact Phone	
-Please mark which committee you are interested in serving on.	Senior Disabled Services Advisory Committee
-* Ad Hoc Committee Name	
-Are you applying for reappointment?	No
-If yes, how long did you serve in this capacity (years and months)?	

-Describe your experience related to the position applying for.	I have been working at the Veterans home in town for over 3 years.
-List current and/or previous involvement on any government boards, committees, commissions or councils.	N/A
-Explain why you are interested in serving in this capacity.	I am very passionate about the work I do with the Veterans, and am committed to providing more resources for seniors and disabled citizens.
Signature	Signed