



CITY MANAGER'S OFFICE

3225 Main Street
Sweet Home, OR 97386
541-367-8969 541-367-1215 FAX
Jfisher@sweethomeor.gov

BOARD/COMMITTEE/COMMISSION APPLICATION

Applicant Information (Please type/print clearly):

Name: Lena Tucker
Permanent Address: [REDACTED] ad Sweet Home, OR 97386
Mailing Address: same as above
Contact Phone Number: [REDACTED]
E-Mail Address: [REDACTED]@centurytel [REDACTED]
Preferred method of contact: ☐ Mail ☒ Phone ☒ Email
Occupation: Retired Employer: _____

Please mark the Board, Commission or Committee in which you are interested in serving:

- ☐ Budget Committee ☐ Planning Commission ☐ Library Board
☐ Board of Appeals ☒ Park and Tree Committee
☐ Charter Review Committee ☐ All Hazard Mitigation Committee

Are you applying for reappointment? ☒ Yes ☐ No

If yes, how long have you served in this capacity: 16? Year(s) ____ Month(s)

- How long have you lived in the area: 18 Year(s) ____ Month(s)
- Please give a brief description of your experiences or training that you feel qualifies you for this particular position.
My formal education and work background is in Forest Management
- List current involvement in other community groups and/or activities.
Linn County Small Woodland Owners; Chintimini Wildlife Center volunteer
- What special contribution do you feel you can make to the group/position you are applying for?
Expertise in selection and care of urban trees, also native plants.

RESIDENCY:

The following applies for appointments that require residency and elector status:

I, Lena Tucker*, certify that I currently reside within the corporate limits of the City of Sweet Home and am an eligible elector as defined by ORS 246.012(5). I further acknowledge that should either my residency or my eligibility as an elector change I will notify the City of Sweet Home immediately.

** Technically I live outside the city limits.*

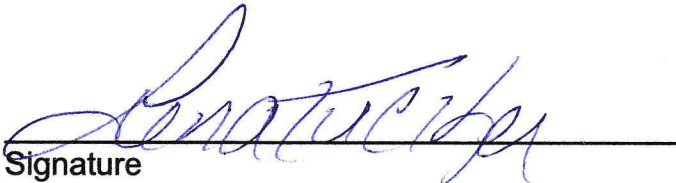
CRIMINAL HISTORY BACKGROUND CHECK (CCH):

A Criminal History Check (CCH) may be performed as part of the City of Sweet Home appointment process for City Boards, Committees, and Commissions. I acknowledge that a refusal to allow the CCH to be performed, when required, will cause my application to no longer be considered.

PUBLIC DISCLOSURE:

The City sometimes receives requests for contact information for members serving on City boards, commissions and committees. As an appointed public body volunteer serving the City of Sweet Home, the information provided on this application is considered public record.

My signature acknowledges that the information I have provided on the application is true and complete to the best of my knowledge and I understand that a CCH may be performed, when required, and that the information provided on this application is considered public record.


Signature


Date of Signature