

## **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: Joshua D. Marvin
Permanent Address: OR 973%
Mailing Address: 5AA
Contact Phone Number:
E-Mail Address:
Preferred method of contacMail
Occupation: FF/Paramedic Employer: Sweet Home Fire + Ambulance District
Please mark the Board, Commission or Committee in which you are interested in serving:
☐Budget Committee ☐☐RIanning Commission ☐☐Library Board
Board of Appeals  Park and Tree Committee
Charter Review Committee All Hazard Mitigation Committee
Are you applying for reappointmen Yes No
If yes, how long have you served in this capacity:Year(s)Month(s)
How long have you lived in the area:Year(s)Month(s)
2. Please give a brief description of your experiences or training that you feel qualifies you for this particular position. I have been employed by Sweet Home Fire, Linn county Sheriff's Office, Linn County Road Repartment, of the City of sweet Home Public works. I'm a few classes short of having my bachelor's degrees in Fire Service Administration.
3. List current involvement in other community groups and/or activities.  I have been a Day's + birds club sports coach, a high school coach, and an active member of the sweet Home Volunteer fiterighters Association. As a member, Wice flesident, + President of the assosciation.
4. What special contribution do you feel you can make to the group/position you are applying for?  I will be an active member + photocolof for the City of Sweet Home. This is  My home and I wan't good things to happen for this community. I with hold  the City's Sest interest in mind.

RESIDENCY:
The following applies for appointments that require residency and elector status:
I,
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.

12-05-22 Date of Signature