



CITY MANAGER'S OFFICE

3225 Main Street Street  
Sweet Home, OR 97386  
PH: 541-367-8969  
jfisher@sweethomeor.gov

**BOARD/COMMITTEE/COMMISSION APPLICATION**

**Applicant Information (Please type/print clearly):**

Name: Ryan Paul  
Permanent Address: 2879 Fir Ct Sweet Home OR 97386  
Mailing Address: SAME AS ABOVE  
Contact Phone Number: [REDACTED]  
E-Mail Address: [REDACTED]  
Preferred method of contact:  Mail  Phone  Email  
Occupation: FIREFIGHTER Employer: SWEET HOME FIRE DISTRICT

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

- Budget Committee  Planning Commission  
 Traffic Safety Committee  Library Board  
 Park and Tree Committee  Charter Review Committee

Are you applying for reappointment:  Yes  No

If yes, how long have you served in this capacity: \_\_\_\_\_ Year(s) \_\_\_\_\_ Month(s)

- How long have you lived in the area: 20 Year(s) \_\_\_\_\_ Month(s)
- Please give a brief description of your experiences or training that you feel qualifies you for this particular position. I CURRENTLY HOLD A POSITION IN PUBLIC SAFETY + HAVE WORKED IN SEVERAL CAPACITIES OVER A 21 YEAR PERIOD.
- List current involvement in other community groups and/or activities.  
NONE AT THIS TIME
- What special contribution do you feel you can make to the group/position you are applying for?  
WORKING IN PUBLIC SAFETY, I FEEL LIKE I MIGHT BE ABLE TO OFFER A DIFFERENT PERSPECTIVE ON THINGS.

**RESIDENCY:**

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

I, Ryatt Pan, 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.

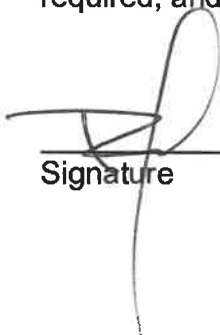
**CRIMINAL HISTORY BACKGROUND CHECK (CCH):**

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

5-23-23  
Date of Signature