



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: Debra Sue Northern  
Permanent Address: [Redacted] Sweet Home, OR. 97386  
Mailing Address: SAME  
Contact Phone Number: [Redacted]  
E-Mail Address: [Redacted]  
Preferred method of contact  Mail  Phone  Email  
Occupation: ON Disability Employer: N/A

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: 2 Year(s) 6 Month(s)

1. How long have you lived in the area: 59 Year(s) 6 Month(s)
2. Please give a brief description of your experiences or training that you feel qualifies you for this particular position. Two yrs on Park + Tree Committee + strong desire to keep up with the clean-up + maintenance of our beautiful + beneficial parks we have here in Sweet Home Area.
3. List current involvement in other community groups and/or activities. Volunteer on Beautification Committee
4. What special contribution do you feel you can make to the group/position you are applying for? open minded + eager to learn all I can to assist in keeping our parks and trees in tip top shape.

**RESIDENCY:**

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

I, Debra Sue Northern, 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.

Debra Sue Northern  
Signature

4/30/2020  
Date of Signature