

CITY OF TEXARKANA, ARKANSAS

Application for Appointment to Citizen Advisory Board or Commission

BOARD OR COMMISSION DESIRED (Please apply for one (1) board or commission per application.)

<input type="checkbox"/> Advertising & Promotion Commission	<input type="checkbox"/> Heating & Air Conditioning Board of Review
<input type="checkbox"/> Airport Authority	<input type="checkbox"/> Historic District Commission
<input type="checkbox"/> Board of Adjustment	<input type="checkbox"/> Library Board
<input type="checkbox"/> City Beautiful Commission	<input checked="" type="checkbox"/> Planning Commission
<input type="checkbox"/> Civil Service Commission	<input type="checkbox"/> Plumbing Board of Review
<input type="checkbox"/> Electrical Review Board	<input type="checkbox"/> Public Facilities Board
<input type="checkbox"/> Equalization Board	<input type="checkbox"/> Other: _____

Name: Chris Owens Home Phone: _____

Address: 3614 Garland Ave Texarkana Resident Yes No 50 Years

E-Mail Address: Christylovegod@gmail.com Miller Co. Voter Registration No. _____

Employer: University of AR Hope/TXK Work Phone: _____

Position: Paraprofessional Cell Phone: 214.545.7165

Education: College: 2 years High School: Graduate

Special knowledge or past experience qualifying you for this appointment: (Please feel free to attach resume):
Community oriented. Have work in community development

Other relevant information (civic activities, memberships, etc.):
I am a CASA, NAACP, started a reading program

References: List the name and phone number of at least one Texarkana resident as a reference, especially any City staff, member of the Board of Directors, or current Committee members who may be contacted on your behalf.
Name: Tendra Washington Phone Number: 903.691-3317

Interest: Explain why you are interested in being appointed to this board or commission.
I love my city and what is best for it.

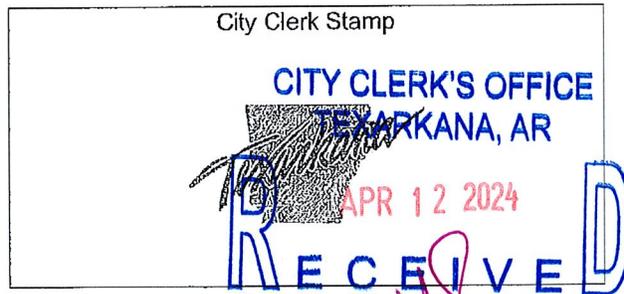
Experience: Indicate what meeting(s) you have attended of the committee for which you wish to be considered.
I have not attended ANY planning Commission meeting.

Number of Texarkana, Arkansas Board of Directors Meetings you have attended in the past 12 months: 6-2024
10-2023

Please read the statement below and sign your name to indicate your understanding.
I UNDERSTAND MY ATTENDANCE WILL BE REQUIRED AT ALL COMMITTEE MEETINGS AND THE INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT.

Signature of Applicant: [Signature] Date Submitted: 4/11/2024

Return completed application to:
Heather Soyars, City Clerk
216 Walnut Street (or)
P O Box 2711
Texarkana TX 75504-2711
Phone 870-779-4995
heather.soyars@txkusa.org



Please Note: This application will be on file for one (1) year.