

## Lindon City Planning Commission Member Application

Date:

Name:

Address:

Telephone:      Cell                                      Work                                      Other

E-mail:

1.      How long have you lived within the City limits of Lindon?      Year(s)
  
2.      How have you previously been involved in your community and/or the City? If so, in what capacity?
  
3.      What do you perceive as the mission of the Planning Commission?
  
  
  
  
  
  
  
  
  
  
4.      Why do you desire to serve on the Planning Commission?
  
  
  
  
  
  
  
  
  
  
5.      What specific skills and/or background will you bring to enhance the effectiveness of this commission?
  
  
  
  
  
  
  
  
  
  
6.      What interests, if any, do you represent within the City (business, non-profit, government, etc.)?

7. List three issues you consider to be of prime importance which the City should address and briefly outline your concern and position on each issue:

1)

2)

3)

8. The Planning Commission meets regularly on the 2<sup>nd</sup> and 4<sup>th</sup> Tuesday of each month. Would you be able to attend meetings beginning at 7:00 p.m.?

Yes                      No

9. Are you comfortable receiving and reviewing packets/information electronically?

Yes                      No

10. Do you anticipate being able to fulfill the full three (3) year term appointment for this position?

Yes                      No

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Selected applicants are required to sign an Authorization for Release of Information for a background check which will be conducted by the City.