

POLICY COMMITTEE APPOINTMENTS INTEREST FORM

The purpose of this form is to assist the Chair of the Board on Public Safety Standards and Training in evaluating the qualifications of an applicant for appointment to a policy committee of the board. Please complete the entire form and return to:

*Tammera Hinshaw, DPSST, 4190 Aumsville Hwy SE, Salem, OR 97317
Phone (503) 373-1553 Fax (503) 378-3326*

POLICY COMMITTEE APPOINTMENT DESIRED

_____ Policy Committee

_____ Position Requirements, if any (e.g. public member, profession, representation)

PERSONAL DATA

Preferred Mailing Address: Home Business Preferred Title _____

First Name _____ MI _____ Last Name _____

Home Address _____

City _____ State _____ Zip _____ County _____

Spouse's Name (optional) _____

Business Name _____

Address _____

City _____ State _____ Zip _____

Occupation _____

Home Phone (_____) _____ Business Phone (_____) _____ ext _____

Fax (_____) _____ E-mail address _____

If this information below is unknown, please call your County Elections Office

Name of your State Senator _____ Senate District # _____

Name of your State Representative _____ House District # _____

Name of your US Representative _____ Congressional District # _____

To assist us in meeting our affirmative action objectives, we would appreciate information about your gender and background. This information is optional. Under state and federal law, this information may not be used to discriminate against you.

Gender

- Male
 Female

Race/Ethnic

- Asian or Pacific Islander
 Black
 Hispanic

- Native American
 White
 Multiracial/Other

Disability
