



# EXECUTIVE APPOINTMENTS INTEREST FORM



Please check if this is an application for reappointment

This form is an application for an Oregon Board or Commission. To complete your application packet, return this form to the Governor's Office, along with your resume, a statement of interest and a bio. You must be an Oregon resident to apply unless otherwise noted. Please contact the Executive Appointments office at (503) 378-6829 if you have any questions.

### Options to Return Application Packet:

**Mail:** Executive Appointments, Office of the Governor 900 Court Street NE, Suite 254, Salem, OR 97301-4075

**Email a PDF to:** executive.appointments@oregon.gov

**Note:** This application is subject to the Public Records Act and may be disclosed upon request. Personal information will be redacted.

### Board/Commission Appointment(s) Desired: (Please print or type)

\_\_\_\_\_  
(Board Name)

\_\_\_\_\_  
(Position)

\_\_\_\_\_  
(Board Name)

\_\_\_\_\_  
(Position)

\_\_\_\_\_  
(Board Name)

\_\_\_\_\_  
(Position)

**First Name:** \_\_\_\_\_ **MI:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Preferred Name:** \_\_\_\_\_ **(Ex: Thomas -> Tom)** **Title: (Mr. Ms. Dr.)** \_\_\_\_\_ **Suffix: (Jr.,PhD)** \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **County (not USA):** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**State Senate District #:** \_\_\_\_\_ **State House District #:** \_\_\_\_\_ **Federal Congressional District #:** \_\_\_\_\_

This is your residential voting district. Click here - <https://www.oregonlegislature.gov/findyourlegislator/leg-districts.html> - or call your county elections office.

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

**Gender Identity:** \_\_\_\_\_ **LBGTQ:**  **Disability:** \_\_\_\_\_

**Race/Ethnicity (Select One):** African American/Black  American Indian/Alaskan Native  Asian   
Caucasian/White  Hispanic/Latino  Native Hawaiian/Pacific Islander   
Multi/Other

**REMINDER:** A complete application packet contains an Interest Form and Executive Appointments Background Information form, as well as your resume, a statement of interest and a short bio.

EXECUTIVE APPOINTMENTS BACKGROUND INFORMATION

Furnishing the following information is voluntary, but failure to provide the requested data may preclude selection for appointment. The Governor’s Office considers the information on this page to have been submitted in confidence pursuant to ORS 192.502(4). The Governor’s Office will not release this page for public inspection unless required to do so. Information submitted on this Interest Form will be maintained confidential to the extent permitted by the Oregon Public Records Law.

The Governor’s staff and the Oregon State Police may conduct a background investigation to obtain information about you. Please provide the following information and sign below to permit the investigation to be conducted. For an appointment to a state board or commission you are expected to comply with all income tax laws.

I hereby authorize the Oregon State Police and the Governor’s Office to request and review any and all records pertaining to me on file with the Department of Revenue, the Motor Vehicles Division, law enforcement agencies and past and present employers, employees, business associates, and acquaintances.

Signature (sign here) \_\_\_\_\_ Date \_\_\_\_\_

Legal Name and Home Address (no PO BOX):

\_\_\_\_\_  
First Middle Last  
\_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip Code

\*Please provide a response to all questions\*

\*If your answer to any of the below questions is YES, please give full details on a separate sheet of paper\*

- a) Please provide any other names you have used or been known as: \_\_\_\_\_
- b) Are you legally authorized to work in the United States? Yes  No
- c) Have you been disciplined, terminated or asked to resign from a position by an employer within the past 10 years? Yes \* No
- d) Have you EVER been convicted, arrested, detained, charged, indicted or summoned to answer for any criminal offense or violation (except minor traffic offenses with a fine of less than \$100.00)? Yes \* No
- e) Have you ever filed for bankruptcy? Yes \* No
- f) Have you ever held a professional license of any kind? Yes \* No
- g) If you have held a professional license, have you ever had disciplinary action of any nature taken against you with regard to such license? Yes \* No  N/A
- h) If you are appointed, is there anything in your background, not covered by questions (a)-(g) above, that might reflect poorly on the State of Oregon or on the Board or Commission to which you have applied, if known publicly? Yes \* No

Disclosure of the last four digits of your Social Security Number is voluntary. If provided, it may be used to verify your identity and to obtain your criminal history records, if any. Failure to provide your SSN for these purposes will delay processing your Interest Form.

Last 4 Digits of SSN: \_\_\_\_\_ Driver’s License Number: \_\_\_\_\_ State: \_\_\_\_\_  
Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_  
Oregon Resident: Yes  No  If yes, how long have you lived in Oregon? \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_