

**TOWN OF GREEN MOUNTAIN FALLS, COLORADO
APPLICATION TO SERVE ON AN ADVISORY COMMITTEE**

Please type or print.

COMMITTEE APPLYING FOR: TRAILS COMMITTEE

NAME: _____

RESIDENCE ADDRESS: _____

MAILING ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____

FAX: _____ E-MAIL ADDRESS: _____

HOW LONG HAVE YOU BEEN A RESIDENT OF GREEN MOUNTAIN FALLS _____

HOW LONG HAVE YOU BEEN A PROPERTY OWNER IN GREEN MOUNTAIN FALLS

ARE YOU A BUSINESS OWNER WITHIN THE TOWN OF GREEN MOUNTAIN FALLS

YES _____ NO _____ IF YES, FOR HOW LONG _____

CURRENT OCCUPATION: _____

PREVIOUS WORK EXPERIENCE: _____

APPLICABLE COMMUNITY ACTIVITIES/VOLUNTEER WORK: _____

SPECIAL QUALIFICATIONS APPLICABLE TO THE COMMITTEE:

WHY DO YOU WANT TO SERVE ON THE COMMITTEE: _____

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LIST ANY OTHER COMMITTEES THAT YOU CURRENTLY SERVE ON:

OTHER COMMENTS:

Please attach any documentation that may enhance your application.

Signature

Date

All applications must be turned into the Town Clerk's Office, Town Hall, 7035 Oak Street, P.O. Box 524, Green Mountain Falls, Colorado 80819. Phone 719-684-9414.