



**APPLICATION FOR APPOINTMENT BY THE CITY COUNCIL  
TO A CITY BOARD, COMMISSION OR COMMITTEE  
OF THE CITY OF MOUNT PLEASANT, TEXAS**

**1. Applicant Name:** \_\_\_\_\_  
(Last) (First) (MI)

**2. Address:** \_\_\_\_\_

**Mailing Address(if different)** \_\_\_\_\_

**3. Contact Information:**

Home Telephone	Work Telephone	Mobil e	Email Address

**4.** Are you a qualified voter in the City of Mount Pleasant? Yes \_\_\_\_\_ No \_\_\_\_\_

**5.** Do you live within the city limits? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, how long? \_\_\_\_\_

**6. EMPLOYMENT:**

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

To the best of your knowledge, are you employed by, or a member of, any entity (business or non-profit) with proposals, programs, requests, businesses, applications, licenses or any other matters which may come before a board or commission for review, funding, support, or approval during the next two years? Yes \_\_\_\_\_ NO \_\_\_\_\_

If yes, list entity and interest: \_\_\_\_\_

**7. Volunteer Experience/ Community Service** \_\_\_\_\_

**8. What experiences qualify you to serve on the Zoning Board of Adjustment?** \_\_\_\_\_

**9. What do you hope to accomplish by serving?** \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**THANK YOU FOR YOUR INTEREST IN THE CITY OF MOUNT PLEASANT**  
APPLICATIONS ARE KEPT ON FILE FOR TWO YEARS FROM DATE OF SUBMISSION

Please return your completed application to:  
City of Mount Pleasant – City Secretary, 501 N. Madison, Mount Pleasant, TX 75455, or email to:  
[cwebster@mpcity.org](mailto:cwebster@mpcity.org).