

Neighborhood Advisory Council (NAC)

APPLICATION FOR APPOINTMENT

Note: Your application will be copied for the City Commission and made available to the press and public

I am a current me	mber seeking reappointment to	o the Council.	
I am seeking a fir	st two-year term as a member	of the Council.	
Name:			
Home Address:			
Home/Cell Phone:			
Current Occupation:			
Work Address:			
Work Telephone:		 	
E-mail:			
Are you a resident of Pitt	sburg?	*	STATE OF THE STATE
If yes, how long have yo	u lived in Pittsburg:		
Do you: Rent Own			NE ME
What quadrant do you liv	ve in?	Odbirday's	
(Dividing lines for quadra	nnts are Broadway & 4 th Street)	NW Z	E 4TH ST
Northeast	Southeast	sw t	SE
		S R R C A D	

Previous Committee/Commis	sion experience:	
•	ume may be attached containing uating your application.	this and any other information
	ity service activities:	
Please explain your reasons	for wishing to serve on this coun	cil and how you feel that you may
Area of interest (please circle	e any/all that may apply):	
Volunteers	Policy	Communication
Clean Up Efforts	Neighborhood Leader	Event Planning
•	•	ne first Wednesday of each month t of Interest Disclosure Statement
Signature of Applicant:		· · · · · · · · · · · · · · · · · · ·
Date:		
If you have any questions re	garding the appointment procedu 230-5532 or by email at <u>jacob.be</u>	

Please return your completed application by **Noon** on **December 1**st, **2025**.

Applications may be submitted:

By mail: The City of Pittsburg 1.

Attn: Deputy City Clerk

PO Box 688

- Pittsburg, Kansas 66762 In person at City Hall (201 West 4th Street), or 2.
- By email to jacob.bennett@pittks.org 3.