



## 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 member seeking reappointment to the Council.

☐ I am seeking a first 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 Pittsburgh? \_\_\_\_\_

If yes, how long have you lived in Pittsburgh: \_\_\_\_\_

Do you: Rent \_\_\_\_\_ Own \_\_\_\_\_

What quadrant do you live in?

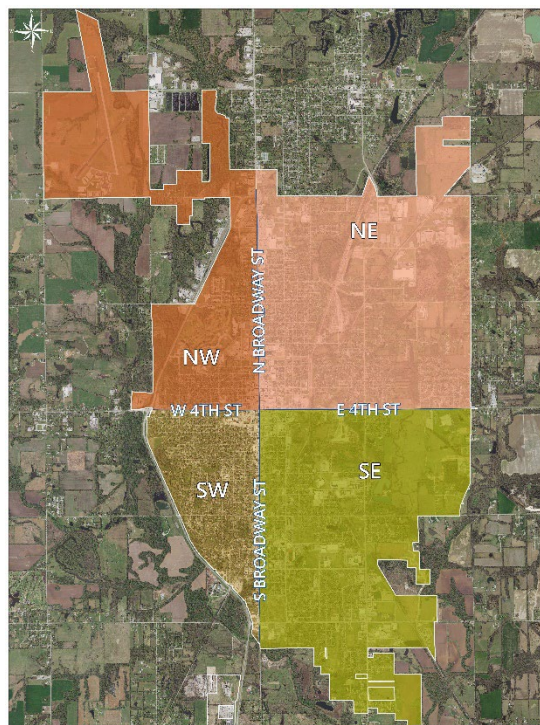
(Dividing lines for quadrants are Broadway & 4<sup>th</sup> Street)

Northwest \_\_\_\_\_

Northeast \_\_\_\_\_

Southwest \_\_\_\_\_

Southeast \_\_\_\_\_



Previous Committee/Commission Experience: \_\_\_\_\_

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Education/Experience: A resume may be attached containing this and any other information that would be helpful in evaluating your application. \_\_\_\_\_

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Professional and/or community service activities: \_\_\_\_\_

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Please explain your reasons for wishing to serve on this council and how you feel that you may contribute: \_\_\_\_\_

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Area of interest (please circle any/all that may apply):

Volunteers

Policy

Communication

Clean Up Efforts

Neighborhood Leader

Event Planning

The Neighborhood Advisory Council meets at City Hall at 12:00 p.m. on the first Wednesday of each month. Appointment to this position may require you to file a Conflict of Interest Disclosure Statement, which is a public record.

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

Date: \_\_\_\_\_

If you have any questions regarding the appointment procedure, please contact the City Clerk by phone at (620) 230-5532 or by email at [tammy.nagel@pittks.org](mailto:tammy.nagel@pittks.org).

Please return your completed application to:  
City of Pittsburg  
Attn: City Clerk  
PO Box 688  
Pittsburg, KS 66762