WASHOE COUNTY CITIZEN ADVISORY BOARDS

WASHOE COUNTY NEVADA

Membership Application

Southwest Truckee Meadows CAB

(Please type or print legibly, and complete the form in its entirety.)

Name:	Nick Name (if preferred):

Residential Home Address

Address:		
City:	State:	Zip:
Assessor's Parcel Number (if known):		
Home Phone:	Email:	

Mailing Address (if different from residential home address)

Street and/or P.O. Box:		
City:	State:	Zip:

Occupation and Business Address

Job Title:		
Business Name:		
Address (Street and/or P.O. Box):		
City:	State:	Zip:
Business Phone:	Email:	

Registered Voter

Are you registered to vote in Washoe County? ☑ **Yes** ☐ **No**

The Washoe County Commission requires that a person be a registered voter in Washoe County (if eligible to vote) to be considered for membership on a Citizen Advisory Board. This requirement may be waived on a case-by-case basis by the County Commission.

How long have you lived in the Citizen Advisory Board area?	(yrs.	/mos.	)
How long have you lived in Washoe County?	(yrs.	/mos.	)
Have you ever been convicted of a felony or misdemeanor other than minor traffic violations? ☐ Yes ☑ No			
If yes, please list conviction dates and nature:			

Positions are limited to Washoe County residents living within the CAB's geographic area and within the areas of responsibility listed below (see Map 2). CAB maps are available at www.washoecounty.us/cab, then choose "Citizen Advisory Board Maps". You may also apply for both the At-Large and At-Large Alternate positions. Please check the appropriate box(es).

☐ Lakeside/Holcomb (1 position)	☐ Zolezzi/Spring Valley/Westridge (1 position)
☐ Mt. Rose (1 position)	☐ At-Large (2 positions)
☐ South Hills (1 position)	☐ At-Large Alternate (1 position)
☐ Windy Hill/Frost Ranch (1 position)	

The Southwest Truckee Meadows CAB meets the third Thursday bimonthly (January, March, May, July, September and November) at 6:30 p.m. at the South Valleys Library, 15650A Wedge Parkway in Reno, and the meetings average 2-3 hours in duration.

Explain briefly, in your own words, why you would like to be appointed to the Citizen Advisory Board. Please attach any additional information you wish.

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I understand the role and responsibility of membership on this CAB and am willing to serve. If appointed, I will attend required meetings and training and will adhere to the CAB bylaws. I certify that, to the best of my knowledge, the information I have provided in this application is true and correct. If the information provided is false or incomplete, it shall be sufficient cause for disqualification or removal. If appointed, I agree to attend a CAB new member orientation session within six months of my appointment. I understand that failure to comply with this requirement will result in automatic removal from the Citizen Advisory Board.

Signature: _____ *Date:* _____

PLEASE RETURN THE APPLICATION TO:

Sheri Ingley, Program Assistant, Community Support Services Program
Washoe County Department of Community Development
P.O. Box 11130, 1001 E. Ninth Street, Room 275, Reno, NV 89520-0027
Phone: 775.328.3612; Fax: 775.328.6133; Email: singley@washoecounty.us

Date Received: _____ Jurisdiction (city/county): _____

Commission District: _____ Date of Appointment: _____

This document is part of the public file and is available for public review.