

District 6 Planning Council-Membership Application

171Front Avenue
St. Paul, MN 55117
Phone: 651-488-4485

district6ed@dist6pc.org
www.district6stpaul.org

Name: _____

Address: _____

Phone: _____ Email _____

1. How long have you lived in the District 6 area?
2. How long have you owned a business or been with an agency or school in the District 6 area?
3. What encouraged you to seek membership on the District 6 Planning Council or its' committees?
4. What skill/experience do you have that will be an asset to District 6?
5. Which of the following District 6 Committees would be of interest to you?
(Check all that apply)
 - () **District 6 Planning Council Board** – Responsible for the organization
 - () **Land Use Task Force** - This committee hears issues related to zoning, licensing, site plans, proposed developments, variances, etc. and makes recommendations to the City
 - () **Other: Volunteer**_

Please describe _____

*Thank you for your time to complete this application.
Any additional information you wish to provide would be welcomed.*

MEMBERSHIP ACCEPTANCE STATEMENT

I desire to serve on the District 6 Planning Council or its' committees. I live in the District 6 Planning Council's area.

If I am selected, I will discharge obligations of membership in a nonpartisan manner and shall not discriminate because of race, religion, national origin, sex, age or affectional preference. I will support the recommendations of the Board and/or Task Force and will not speak as a representative of District 6 unless expressly requested to.

I am aware that the discharge of duties will require at least one meeting per month and that three unexcused absences from meetings may result in the automatic removal from the Planning Council and/or its' committees. I further understand that if I serve as a Board Member for the District 6 Planning Council I will be expected to serve on one additional committee, attend additional meetings or volunteer for an event.

Signed

Dated

FOR OFFICE USE ONLY. DO NOT WRITE BELOW THIS LINE.

Date accepted: _____

Position appointed/elected: _____

Precinct: _____

Business Name: _____

Agency/School Name: _____

Date resigned/completion of term: _____