



Boards and Commission Application

Board being applied for: _____

Personal Information

First Name

Last Name

Address

Phone and Email Address

Business

Business Address

Occupation

Driver's License or ID

Number

State Issued

Expiration Date

Residency Information

Length of Residency in Gatesville/Gatesville ETJ _____

Are you a registered voter? _____

Are you related to anyone on City Council for the City of Gatesville? _____

If yes, please list who you are related to? _____

Are you related to an Employee for the City of Gatesville? _____

If yes, please list who you are related to? _____

I certify that all information in this application is true and correct. I understand and agree that any false information, misrepresentation, or concealment of fact is sufficient grounds for either my immediate discharge without recourse, or refusal by the City of Gatesville. I understand and agree that all information in this application may be verified by the City of Gatesville. I authorize the City of Gatesville to verify and investigate the status of my driver's license and to conduct any background check it deems necessary, including review of criminal history records. I hereby release the City, and any individual who provides or obtains information pursuant to this authorization, from any and all liability for damages of any kind that may result to me on account of compliance or attempts to comply with this authorization. I am also aware that my application is subject to the Texas Open Records Law and may be released as a public document. I understand that this is not an agreement between the City of Gatesville and the applicant.

Print Name

Signature

Date

Office Use Only

Received by: _____

Notes:

Approved/Denied

Meeting date: _____

Resolution No.: _____