

# City of Kelso

## Application for City Councilmember

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**Name:** \_\_\_\_\_

**Physical Address:** \_\_\_\_\_

**Length of Residence in Kelso:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Phone (wk):** \_\_\_\_\_ **(hm):** \_\_\_\_\_ **(cell):** \_\_\_\_\_

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**Occupational status and background:** \_\_\_\_\_

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**Organizational Affiliations:** \_\_\_\_\_

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**Why are you seeking appointment?:** \_\_\_\_\_

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**What are your City related goals?:** \_\_\_\_\_

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**What strength/skills can you bring to the Council?:** \_\_\_\_\_

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**What training/experience do you possess that would set you apart as a councilmember?:**

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**Closing comments:** \_\_\_\_\_

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**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*By signing this form, you agree to allow the City of Kelso to release your answers, information and additional documents that you supplied with this application.  
The City of Kelso is an Equal Opportunity Employer*