



Name:	
Please indicate your first and second choice below:	
Ad Hoc Committees (when necessary)	Personnel Board (when necessary)
Board of Adjustment (4 <sup>th</sup> Monday)	Planning Commission (1st Thursday)
CEDA* (last Wednesday) *Choctaw Economic Development Authority	Public Recreation Advisory Board (2 <sup>nd</sup> Tuesday)
Construction Board of Appeals (when necessary)	
Personal Information:	
Home Address:	Ward #
Home/Work (circle one) Phone #	Cell
Email:	
Employer:B	susiness Address:
Occupation: I have b	een a resident of Choctaw for years.
Registered voter: Yes / No Do you pay a water/sew	er/trash bill to the City of Choctaw? Yes / No
Do you have any outstanding debts, taxes, or other liability	ity to the City? Yes / No
Have you ever or do you currently serve on any other Cit	ry boards? Yes / No
If yes, what board/City and dates?	
Are you involved in any community activities? Yes / No	
Do you have any specialized training, skills, experience of if you are appointed? Please describe:	or education that you feel would be beneficial to the City

•	additional information about yourself or add	•	
would make you a good candidate for a C	City board		
•	l all meetings and training may be required f		
board members are expected to prepare in	advance for each meeting with materials pr	rovided by the City.	
By signing below I indicate that I am awa	are of the meeting dates and times of the Boa	ard/Commission I have	
applied for and agree that I am available a	and able to meet the terms and expectations	as outlined above.	
	Signature		
*** Additional informat	ion may be required for individual board	s ***	
For Official Use Only	Ward Confirmed: Yes / No	1	
For Official Use Only  Date Application Received:		Board Nominated:	
Date Application Received:	Board Nominated:		
Date Application Received:Applicant Interview scheduled:	Board Nominated: Date		