Please return to the City of Tulsa – Office of the Mayor – 175 East Second Street, 15th Floor – Tulsa, OK 74103
Fax: 918-596-9010 Phone: 918-596-7411 E-mail: boards@cityoftulsa.org

City of Tulsa Authorities, Boards and Commissions Application

For purposes of this application the word "committee" is intended to include authorities, boards and commissions as established by the City of Tulsa Charter or ordinances. By submitting this application, the applicant authorizes any background check which may help in the selection process, including but not limited to, criminal background checks. All questions must be completed for this application to be considered. Once submitted, all of the information in this application is available to the public, under the Oklahoma Open Records Act, 51 O.S. §24A.1. *et seq.*, including the applicant's name, address, employment, skills, training and experience. Please submit your resumé with this application; however, submission of a resumé is not a substitute for a fully completed application.

Name: _____ ☐ Mr. ☐ Ms.
First Last Middle Initial

Home Address: _____

Contact Telephone No.: _____ Email address: _____

Occupation: _____ Employer: _____

Employment Address: _____
Street City State Zip Code

In order to be appointed to a City of Tulsa Authority, Board or Commission, the City of Tulsa Charter requires that you are a resident of the City of Tulsa. How many years have you lived in the City of Tulsa?
_____

Are you over 18 years of age? ☐ Yes ☐ No

In which Council District do you reside? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐

Please describe any previous work or contact you have had with a City of Tulsa Committee:
_____
_____
_____

What Committee, if any, would you prefer? _____

Describe the skills, training, expertise or experience you have that you believe would qualify you to serve on a Committee:
_____
_____
_____
_____

Provide a summary of your educational background, starting with high school:
_____
_____
_____

References (at least one must be a professional reference):

Name: _____ E-mail: _____
First Last

Address: _____

Phone Nos.: _____
(Please include area codes) Home Work Cell Fax

How long and in what capacity have you known this person?

_____

_____

Name: _____ E-mail: _____
First Last

Address: _____

Phone Nos.: _____
(Please include area codes) Home Work Cell Fax

How long and in what capacity have you known this person?

_____

_____

Are you currently involved in any litigation, dispute or claim against the City of Tulsa (whether as an attorney, a claimant/plaintiff or as a witness)? ☐ Yes ☐ No

If so, please describe your role and the nature of the lawsuit or claim:

_____

_____

If selected to serve on a committee, are you willing to adhere to the City of Tulsa Ethics Ordinance, 12 TRO §600, *et seq.*? ☐ Yes ☐ No

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The following information is **strictly voluntary and will be used only in accordance with law**

*In an attempt to ensure that Committee representation reflects the makeup of our communication, please check the box which is applicable to you:

☐ Caucasian ☐ Hispanic ☐ African-American ☐ Southeast Asian
☐ Asian or Pacific Islander ☐ American Indian or Alaskan Eskimo

*Disabled: ☐ Yes ☐ No

If special accommodations are requested to allow you to serve on a Committee, please specify/identify:

_____

_____