APPLICATION FOR APPOINTMENT
CITIZENS TRANSPORTATION ADVISORY COMMITTEE (CTAC)

NAME OF APPLICANT:		
RESIDENCE STREET ADDRESS:	**CITY:**	**ZIP:**
RESIDENCE TELEPHONE NUMBER:	**BUSINESS TELEPHONE NUMBER:**	
BUSINESS STREET ADDRESS:	**CITY:**	**ZIP:**
1. Are you a full-time paid officer or employee of local/state government (circle one)? NO Yes If yes, where position		
2. Education:		
3. Present Occupation:		
4. Membership in organizations:		
5. Please describe why you are interested in serving on this committee. (Use reverse side for any additional information – 200 words maximum):		
6. Please describe other community activities that you have been involved in:		
7. Signature of applicant:		
8. Date:		