



CITY OF GOLIAD
Volunteer Board Application Form

Please submit completed application to:
City Secretary's Office – 152 W End St, Goliad, TX 77963 (361)-645-3454

Please circle which board you are applying for:

Planning and Zoning Economic Development Main Street Board of Architectural Review

I support the applicant to serve as a Board Member.

Signature of current Council Member: _____

Full Name: _____

Residential Address: _____

Mailing Address: _____

Primary Phone: _____ Mobile Phone: _____

Email Address: _____

Current Profession (if retired, please list former profession): _____

What days and times are you available to volunteer:

Mon	Tue	Wed	Thu	Fri	Sat	Sun
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Any time _____ Mornings _____ Afternoons _____ Evenings _____

Please indicate your volunteer skills and interests as applicable. You may check as many categories as you would like to be considered for.

Skill	Interest	Assignment
		Economic Development (business recruitment, retention, attraction, tourism)
		Tour Guide/ Public Speaking
		Historical/ Architecture
		Garden/ Assist in Adopt-A-Planter/ Tree projects
		Routine Office Work (copying, data entry, etc.)
		Graphic Design
		Teaching/Instructional
		Special Events (meet/greet, registration, set up/tear down, runner/floater, sell refreshments)
		Grant Research/Writing
		Housing Development
		Construction
		Accounting
		Legal
		Fundraising
Other skills/interest:		

- Describe your expertise, experience, accomplishments, educational background, and/or interest in promoting and/or developing business enterprise in the spirit of community development.

- Do you have any physical limitations/restrictions or other health-related issues that will need to be accommodated? **Y** **N** If yes, please explain so we may accommodate:

3. Have you ever been convicted of, pleading guilty to, or received deferred adjudication for any criminal offense (misdemeanors and felonies) within the last seven (7) years? **Y** **N**

If yes, please explain: (**Note:** this may not automatically disqualify you from serving).

Please provide at least two (2) references who can speak to your attributes as a potential member of the City of Goliad Volunteer Board(s).

Name: _____

Organization/Affiliation: _____

Address: _____

Phone number: _____

Email: _____

Name: _____

Organization/Affiliation: _____

Address: _____

Phone number: _____

Email: _____

I understand that if nominated for and subsequently appointed to the board, I am obligated to attend meetings and be an active participant in the affairs of the City of Goliad Volunteer Board of which I have applied.

Signature _____

Date _____