

Please return via email to:
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Via mail:
Blueprint Intergovernmental
Agency
315 South Calhoun St, Suite 450
Tallahassee, Florida 32301

Via fax: (850) 219-1098

Questions? Please call: 219-1060



INTERGOVERNMENTAL AGENCY

**CITIZEN ADVISORY COMMITTEE
APPLICATION**

Nominating Organization (if applicable): _____

Position Applied For:

Name: _____

Address: _____

Email: _____

Work Phone: _____ **Home Phone:** _____

Occupation: _____

Employer: _____

Address: _____

Race: White Hispanic Asian or Pacific Islander
 Black American Indian or Alaskan Native Other

Sex: Male Female

Identify any potential conflicts of interest that might occur if you are appointed:

Are you a City resident? Yes No
Are you a Leon County resident? Yes No
Are you a City property owner? Yes No

Are you a Leon County property owner?
Can you serve a full three-year term?
Can you regularly attend meetings?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Conflicts: _____

