



**CITY OF MAPLE VALLEY  
COMMUNITY SERVICES APPLICATION**

**Public Arts Commission**

*(Please print or type)*

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Work Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**NOTICE**  
Each applicant will be interviewed in public by City Council prior to the Council meeting

**\*Select which the following apply (you may select more than one if applicable).**

- I reside within the corporate limits of the City of Maple Valley
- I am employed within the corporate limits of the City of Maple Valley
- I am a High School or College student and live within Tahoma 409 School District boundaries

**\*What position are you applying to fill, a voting or non-voting position?**

- Voting (member)
- Non-Voting (Two (2) Students (HS and/or College); One (1) member employed within the corporate limits of the City of Maple Valley and Three (3) Alternates)

**Please answer the following questions:**

1. List your educational background.
  
  
  
  
  
  
  
  
  
  
2. Please state your occupational background, beginning with your current occupation and employer (may attach resume).



**COMMUNITY SERVICES APPLICATION**  
**PUBLIC ARTS COMMISSION (Cont.)**

3. What other special expertise do you have which would be applicable to the Public Arts Commission?

4. Describe your involvement in the Maple Valley community (current or past involvement).

5. Please explain why you are interested in serving in this volunteer position.

6. What do you see the role of the Public Arts Commission playing in the City of Maple Valley?

7. What do you consider to be a "successful" Public Arts Commission for the City of Maple Valley?



COMMUNITY SERVICES APPLICATION  
PUBLIC ARTS COMMISSION (Cont.)

**Attendance & Training Requirements**

**Appointments to this commission will require your consistent attendance at regularly scheduled meetings. Are you able to meet this requirement?**

Evening meetings (a check indicates yes)

***Appointment to this commission will require you complete Open Public Meetings Act and Public Records Act training within the first 30 days following appointment. Are you able to meet this requirement?***  (a check indicates yes)

**Please return this application by the deadline, by mail, to:**

**City of Maple Valley  
Attention: City Clerk  
P. O. Box 320  
Maple Valley, WA 98038  
Phone: 425-413-8800  
Fax: 425-413-4282**