



**CITY OF MAPLE VALLEY  
COMMUNITY SERVICES APPLICATION  
PARKS & RECREATION 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

**\* Do you reside within the corporate limits of the City of Maple Valley?**

YES       NO

**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  
PARKS & RECREATION 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?**

Daytime meetings (a check indicates yes)     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**