



Social Services Advisory Board Application

CITY SECRETARY'S OFFICE
P.O. BOX 617 | KATY, TEXAS 77493
(281) 391 – 4804

The Social Services Advisory Board assists and advises the Social Services Director on implementing and promoting various informative services on matters related to Katy Senior Citizens.

The board is composed of seven (7) members. Members shall be qualified residents of the City of Katy. The board members serve for one-year terms.

This is only an application and does not guarantee participation on the board. All applications must be received at the City of Katy City Secretary's Office at City Hall, 901 Avenue C Katy, Texas 77493, by fax at 281-391-4937, or by email at mbunch@cityofkaty.com.

PLEASE PRINT

PERSONAL INFORMATION:			
1. Full Name: _____			
FIRST	MIDDLE	LAST	
2. Home Address: _____			
STREET	CITY	ZIP CODE	
3. Contact Information: _____			
HOME PHONE	CELL/WORK PHONE	EMAIL	
4. Professional: _____			
Information	OCCUPATION (if retired, please indicate former occupation)	*If business owner, NAME OF BUSINESS	

EDUCATION (optional)			
5. Professional Licenses: _____			
6. Professional Association Memberships: _____			
7. Civic/Volunteer Organization Activities: _____			
8. Are you related to anyone on City Council? _____			
9. Do you have any delinquent taxes, utilities, or other assessments owed to the City? _____			
10. Do you have any pending claims or litigation against the City? _____			

RELEVANT EXPERIENCE:

11. Please list any Boards/Commissions/Committees you currently serve on: _____

12. Please list any experience, interests, or skills that qualify you to serve on the Social Services Advisory Board:

If you have any questions about this application, please contact the City of Katy City Secretary's Office at 281-391-4804 or email your questions to mbunch@cityofkaty.com.

NOTE: This application may be subject to the Texas Public Information Act and will be retained and considered by the City for two (2) years.

SOCIAL SERVICES ADVISORY BOARD AGREEMENT

By signing this application, applicant acknowledges and agrees to the following:

- Applicant must be a City of Katy resident.
- Participation on the Social Services Advisory Board requires a one-year time commitment (meetings will be held on the fourth Monday of every month).
- Applicant agrees to make a good faith effort to attend all committee meetings.
- All Committee meetings shall be held in a location that is generally available to and accessible by the public.
- All committee meetings are subject to the Texas Open Meetings Act and the Texas Public Information Act.
- I understand that should a situation arise during my term on said board/commission or committee where I have a prohibited substantial interest, either direct or indirect, and such matter comes before said board/commission or committee, I understand that I will need to abstain from any discussion or vote on the matter.
- Completing and signing this application does not guarantee selection for participation on the board.
- If selected, Applicant will be nominated by the Mayor.
- Upon selection, applicant will be invited to an interview with the Mayor, chairperson of the board, and a member of staff.
- Board membership will ultimately be decided by City of Katy City Council.
- If appointed, applicant will attend the mandatory board orientation.

SIGNATURE OF APPLICANT

DATE

(NOT REQUIRED FOR EMAIL SUBMISSION)

If you have any questions about this application, please contact the City of Katy City Secretary's Office at 281-391-4804 or email your questions to mbunch@cityofkaty.com.

Delivery Options

Print

This form may be printed and mailed to P.O. Box 617, Katy TX, 77492-0617 or hand delivered to the City Secretary's Office at 901 Avenue C in Katy, Texas 77493. You may also fax it to: 281-391-4937.

Email

Please attach the saved form and send it to mbunch@cityofkaty.com.