



## Siuslaw Valley Fire & Rescue Budget Committee Application

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

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Please answer yes (Y) or no (N):

1. Are you a registered voter residing within the Siuslaw Valley Fire & Rescue District? \_\_\_\_\_
2. Are you able to attend daytime meetings as necessary? \_\_\_\_\_
3. Are you able to attend evening meetings as necessary? \_\_\_\_\_
4. Are you aware that committee members may have to devote up to 20 hours that include reviewing the budget and meeting on to three times between April and June each year? \_\_\_\_\_
5. Do you, or any family members, have any business dealings with the Siuslaw Valley Fire & Rescue District? \_\_\_\_\_
6. Can you foresee any potential conflicts of interest that would prevent you from making impartial decisions? If so, please explain: \_\_\_\_\_  
\_\_\_\_\_

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Please provide brief answers to the following:

7. How many years have you lived in the Siuslaw Valley Fire & Rescue District? \_\_\_\_\_
8. What is your occupation? \_\_\_\_\_
9. What experience have you had related to budgeting?  
\_\_\_\_\_
10. Please list any city, county, or state committees you are on:  
\_\_\_\_\_
11. What other qualifications do you possess that would benefit the committee?  
\_\_\_\_\_
12. Please explain why you want to be appointed to the committee:  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_