

City of Norman CITIZENS ADVISORY BOARD

Please complete the following application and attach a resume containing your life history and relevant experience to serving on the Citizens Advisory Board.

Personal Information:				
Last Name	First Name	Age	Date of Birth	Social Security #
Home Address		City	State	Zip Code
Driver's License Number & State		Home Telephone	Cell Phone	Work Phone
Occupation & Employer Address			Email Address	
Appointment to the Citizens Advisory Board requires a member be a permanent resident in the City of Norman.				
Please Circle Answer---Include Address on Line Below Question (If YES)				
I am a permanent resident of the City of Norman			YES	NO
If yes, provide address				
While not an automatic disqualifier, failure to list a criminal conviction (other than traffic) may result in disqualification.				
Please list any criminal convictions (other than traffic). If necessary, use the back of this page.				
Type of Incident	Date		Location	
A nominee to the Citizens Advisory Board and any member of the nominee's immediate family may not be currently employed by the City of Norman, nor may the nominee or any immediate family member be a former sworn employee of the Norman Police Department.				
Are you or any of your immediate family members currently employed by the City of Norman, or have you or any immediate family member been a sworn employee of the Norman Police Department?				
YES			NO	
A nominee may not currently be a party nor be a legal representative in litigation against the City of Norman.				
Are you currently a party or legal representative in litigation against the City of Norman?				
YES			NO	
List your motivation to serve on the NCAB as well as organizations and community activities:				
Signature of Applicant:				Date:

