

Town of Rockford

20 W. Emma St. - P.O. Box 49 - (509)291-4716 - Fax (509)291-5733

APPLICATION FOR PLANNING COMMISSION POSITION

All commission members serve in a volunteer capacity.

Name:	Date	:
Address:		
Phone:	Email:	
Are you a Rockford resident? a resident? What is your ed		
Why do you wish to serve on the Plan	ning Commission?	
What previous experience do you have	e serving on a board, committee, or o	commission?
What experience/interest do you have	e that will assist you in filling the posi	tion you seek?
You may continue to another sheet if r	needed.	

Meetings are held on the Tuesday prior to the first Wednesday of the month, for no less than 9 months per year. Will you be able to attend these meetings? _____

Mayor Carrie Roecks