



# CITY OF ST. PETERS

One St. Peters City Centre Boulevard • P.O. Box 9 • St. Peters, MO 63376-0090  
636.278.2244 • 636.477.6600

## Application for Appointment to a Board or Commission

In selecting members for the various Boards and Commissions in St. Peters, the Mayor and Board of Aldermen try to obtain a broad mix of people with diverse talents and interests. Many of the questions on this form are asked only to provide information so that diversity can be maintained.

**Be sure to sign page 2 and sign and date page 3.**

If this application is for re-appointment to a board or commission you are currently on, you need only complete items on pages 1 and 2 that have changed since your previous application. Please sign page 2. Complete, sign and date page 3.

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

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Email address: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Length at this residence: \_\_\_\_\_ Ward: \_\_\_\_\_ Are you registered to vote? \_\_\_\_\_

Have you ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you willing to attend meetings on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

**Board Appointment Desired:**

\_\_\_\_\_ Parks, Recreation and Arts Advisory Board

\_\_\_\_\_ Board of Adjustment\*

\_\_\_\_\_ Board of Appeals

\_\_\_\_\_ Planning and Zoning Commission\*

\_\_\_\_\_ Veterans Memorial Commission

\_\_\_\_\_ Other

\_\_\_\_\_ Senior Advisory Committee  
(Citizen members must be at least age 60)

Occupation: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Educational Background: \_\_\_\_\_

Experiences (either paid or volunteer) related to the position sought: \_\_\_\_\_

Community Organizations to which you belong or support: \_\_\_\_\_

*\*A personal financial disclosure statement must be filed annually. Applicants for appointment to the Board of Adjustment and the Planning and Zoning Commission must also complete pages 3 and 4 of this application.*

Have you ever served on a Board or Commission? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, specify: \_\_\_\_\_

Have you ever held an elected or appointed office? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, specify: \_\_\_\_\_

Special areas of interest not reflected in job or educational background: \_\_\_\_\_

Sources of family income (not amounts received): \_\_\_\_\_

Real estate holdings in St. Peters (owned by yourself or immediate family or being purchased): \_\_\_\_\_

Why do you wish to serve on this Board? \_\_\_\_\_

**PLEASE NOTE:** *This application will be cross-referenced with the sexual offenders registry. Any information on this application form may be subject to disclosure pursuant to the Sunshine Law.*

Signature: \_\_\_\_\_

**Please attach a resumé or letter if available.**

**Return to:** *City of St. Peters  
Office of the Mayor  
P.O. Box 9  
St. Peters, MO 63376-0090*



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## Disclosure Statement

(Addendum to Application for Appointment to City Boards and/or Commissions)

1. Are you, or have you or any member of your family, ever been associated with or held a position with any area industry, such as Contractors', Associations, Trucking Associations, Home Builders' Associations, etc.?

Yes \_\_\_\_\_

No \_\_\_\_\_

If yes, please identify such enterprise and describe your relationship with it. \_\_\_\_\_

2. Are you a director, officer, sole owner, partner or employee of, consultant or advisor to, any business enterprise which to your knowledge or belief supplies the City of St. Peters with any property, goods, or services?

Yes \_\_\_\_\_

No \_\_\_\_\_

If yes, please identify such enterprise and describe your relationship with it. \_\_\_\_\_

3. Do you or any member of your immediate family have any direct or indirect financial interest in any business enterprise which to your knowledge or belief supplies the City of St. Peters with any property, goods, or services?

Yes \_\_\_\_\_

No \_\_\_\_\_

If yes, please identify such enterprise and describe your relationship with it. \_\_\_\_\_

4. In the past 12 months, have you participated on behalf of the City of St. Peters in any transaction between the City of St. Peters and any business enterprise?

Yes \_\_\_\_\_

No \_\_\_\_\_

If yes, please identify such enterprise and describe your relationship with it. \_\_\_\_\_

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



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# Acknowledgment of Mandatory Training

(Addendum to Application ONLY for Appointment to Planning and Zoning Commission or Board of Adjustment)

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

I understand as part of my appointment to the (circle one) Planning and Zoning Commission / Board of Adjustment, I will attend mandatory training on the federal Fair Housing Act and Title II of the Americans with Disabilities Act within sixty (60) days of my appointment. I also understand that failure to attend such mandatory training within sixty (60) days shall subject me to removal from office in accordance with Missouri state law and City ordinances.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature