



City of Palmer
231 W. Evergreen Ave. Palmer, AK 99645
907 761-1301

Wayfinding Citizens Advisory Committee Application

Date: _____

Name: _____

Residence address: _____

Mailing address: _____

Phone number(s):

Home: _____ Work: _____ Cell: _____

Email address: _____

Employer: _____ Occupation: _____

Member or active interest in the following organizations:

Please explain your reason for applying:

You are welcome to attach an outline of your education, work and volunteer experiences, and other interests. Please note: this form and all of the information on the form is subject to the Public Records Act. All information will be treated as public information.

For office use only:

Date received: _____ By: _____

Attachments? Yes NO