

EXECUTIVE APPOINTMENT INTEREST FORM INSTRUCTIONS

Please save your interest form to your desktop or in a folder on your computer for future use and revisions. Board members seeking reappointment check the box next to the word reappointment*

There are 3 options to return your form to us; mail, fax, or via email.

Information provided in this application is subject to the Public Records Act and may be disclosed upon request. The personal information will be redacted.

EXECUTIVE APPOINTMENTS INTEREST FORM

Check this box if this is for reappointment *

Please also include a résumé and statement of interest.

This form is an application for an Oregon Board or Commission. Please fill it out completely and return it to the Governor's Office. If you have any questions feel free to call the Executive Appointments office at: (503) 378-2317.

Options to Return This Form:

Mail: Executive Appointments, Office of the Governor 900 Court St. NE Salem, OR 97301-4075
Use our secure fax number at: (503) 373-0840
Email a scanned copy to: executive.appointments@das.state.or.us

Board/Commission Appointment(s) Desired: (Please print or type)

Board Name: _____ Position Requirements (If any): _____
Board Name: _____ Position Requirements (If any): _____

First Name: _____ MI: _____ Last Name: _____
Preferred Name: (Ex: Thomas & Tom) Title: (Mr, Ms, Dr,) Suffix: (jr, PhD)
Occupation: _____ Select one: Home Work:

Preferred Mailing Address: _____
City: _____ State: _____ Zip Code: _____ County: _____
(Ex: Marion, Multnomah, Not USA)

Cell Phone: _____ Work Phone: _____ Home Phone: _____
Email Address: (Please print) _____

State Senate District #: _____ State House District #: _____ Federal Congressional District #: _____
(You can find this information at: <http://handru.lg.state.or.us/findlegdist/home.htm> or call your county elections office. This is your home voting district.)

To assist us in meeting our affirmative action objectives, we would appreciate information about your gender and background. This information is optional. Under state and federal law, this information may not be used to discriminate against you.

Gender: Male: Female: Disability: _____
Race/Ethnicity: Asian/Pacific Islander African American: Hispanic: Native American: Caucasian: Multi/Other:

IMPORTANT!
Attach a résumé with your work and educational background and any other experience relevant to this position. Your statement of interest should include a paragraph describing in detail why you wish to serve on this particular board or commission, and why you meet the requirements for appointment. You must be an Oregon resident to apply unless otherwise noted. Please review your information to ensure accuracy.

* Did you remember to include your resume, statement of interest, and sign your background form?

1

Board/Commission Desired

Enter the name of the board or commission you are interested in along with the position required. For example, Mechanical Board – Heating/Frost Insulation position.

Occupation What you do for work or career.

Select your preferred mailing address:

Home or Work

Complete your **title, first name, middle initial, last name, and suffix** followed by your mailing address. City State Zip Code and County (Not USA, Multnomah, Marion, Lane, etc.)

Enter your **cell, work, and home** phone numbers where we can reach you and your **email address**.

Include Your **Senate, House, and Congressional** districts. This is your home voting district. Not sure? Click on the link in the form and input your address. <https://www.oregonlegislature.gov/FindMyLegislators> - bottom right corner.

Affirmative Action Items

Gender, Disability, & Race

This information is helpful to ensure we are providing equal representation to our boards and commissions.

Background Page

Complete this page as required. The information here is used for background/revenue checks and is not included when reviewing your interest form.

IMPORTANT For questions requiring an explanation (questions c-h) it is recommended that a separate piece of paper be used for details.

Remember to include your **résumé** and **statement of interest** why you would like to be a part of your desired board. A **bio** is required for boards requiring senate confirmation.

Reappointments, must also include a **statement of interest**; a brief paragraph of 300-400 words is sufficient. **Résumés** should also be included even if there are no changes.

Once the form is complete, print, sign it, and review your form to ensure the information is accurate and complete. Mail, fax, or email your interest form to Boards & Commissions. Do not send documents separately!

Questions? Feel free to call us at (503) 378-2317, and thank you again for your willingness to serve!

All candidates are subject to background checks!



EXECUTIVE APPOINTMENTS INTEREST FORM



Check this box if this is for reappointment *

****Please also include a résumé and statement of interest.****

This form is an application for an Oregon Board or Commission. Please fill it out completely and return it to the Governor's Office. If you have any questions feel free to call the Executive Appointments office at: (503) 378-2317.

Options to Return This Form:

Mail: Executive Appointments, Office of the Governor 900 Court St. NE Salem, OR 97301-4075

Use our secure fax number at: (503) 373-0840

Email a scanned copy to: executive.appointments@oregon.gov

Note: Information provided in this application is subject to the Public Records Act and may be disclosed upon request. Personal information will be redacted.

Board/Commission Appointment(s) Desired: (Please print or type)

(Board Name)

Position Requirements (If any)

(Board Name)

Position Requirements (If any)

First Name: _____ **MI:** ____ **Last Name:** _____

Preferred Name: _____ (Ex: Thomas -> Tom) **Title:** (Mr. Ms. Dr.) _____ **Suffix:** (Jr., PhD) _____

Occupation: _____ (Select one) **Home:** **Work:**

Preferred Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____ **County:** _____

(Ex: Marion, Multnomah; Not USA)

Cell Phone: _____ **Work Phone:** _____ **Home Phone:** _____

Email Address: (Please print) _____

State Senate District #: _____ **State House District #:** _____ **Federal Congressional District #:** _____

(You can find this information at: <https://www.oregonlegislature.gov/> - Find My Legislators - or call your county elections office. **This is your home voting district.**)

To assist us in meeting our affirmative action objectives, we would appreciate information about your gender identity and background. This information is optional and is used for data collection only. Under state and federal law, this information may not be used to discriminate against you.

Gender Identity: _____ **LGBTQ:** **Disability:** _____

Race/Ethnicity: Asian/Pacific Islander | African American: | Hispanic: | Native American: | Caucasian:

Select One Multi/Other: |

IMPORTANT (Please Read)!

A résumé detailing your work, educational background, and relevant experience is required. For boards requiring senate confirmation, a short Bio* is also required highlighting key career and personal/professional community activities. A statement of interest describes why you wish to serve on this particular board or commission, and why you meet the requirements for appointment. You must be an Oregon resident to apply unless otherwise noted. Please review your information to ensure accuracy.

*** Did you remember to include your Bio*, Resume, Statement of Interest, and sign your background form?**



EXECUTIVE APPOINTMENTS BACKGROUND INFORMATION

Furnishing the following information is voluntary, but failure to provide the requested data may preclude selection for appointment. The Governor's Office considers the information on this page to have been submitted in confidence pursuant to ORS 192.502(4). The Governor's Office will not release this page for public inspection unless required to do so. Information submitted on this Interest Form will be maintained confidential to the extent permitted by the Oregon Public Records Law. Be sure to check **ALL** relevant response boxes below. Do Not Leave Blank.

The Governor's staff and the Oregon State Police may conduct a background investigation to obtain information about you. Please provide the following information and sign below to permit the investigation to be conducted. For an appointment to a state board or commission you are expected to comply with all income tax laws.

I hereby authorize the Oregon State Police and the Governor's Office to request and review any and all records pertaining to me on file with the Department of Revenue, the Motor Vehicles Division, law enforcement agencies, and past and present employers, employees, business associates, and acquaintances.

Signature (sign here) _____ **Date** _____

- a) Please provide any other names you have used or been known as : _____
- b) Are you legally authorized to work in the United States? Yes No
- c) Have you been disciplined, terminated or asked to resign from a position by an employer within the past 10 years? Yes * No
- d) Have you EVER been convicted, arrested, detained, charged, indicted or summoned to answer for any criminal offense or violation (except minor traffic offenses with a fine of less than \$100.00)? Yes * No
- e) Have you ever filed for bankruptcy? Yes * No
- f) Have you ever held a professional license of any kind? Yes * No
- g) If you have held a professional license, have you ever had disciplinary action of any nature taken against you with regard to such license? Yes * No N/A
- h) If you are appointed, is there anything in your background, not covered by questions (a)-(g) above, that might reflect poorly on the State of Oregon or on the Board or Commission to which you have applied, if known publicly? Yes * No

* If your answer to any of the above questions (c) - (h) is "yes," please give full details on the back of this page or a separate sheet of paper.

Legal Name and Home Address (no PO Box) (Please print or type. **Do Not Leave Blank.**)

First MI Last

Street

City State Zip

Disclosure of your Social Security number is voluntary. If provided, it may be used to verify your identity and to obtain your criminal history records, if any. Failure to provide your SSN for these purposes will delay processing your Interest Form.

Social Security Number _____ - _____ - _____ Driver's License Number _____ State _____

Date of Birth _____ / _____ / _____ Place of Birth _____
Month Day Year City State

Oregon Resident? Yes No If yes, how long have you lived in Oregon? _____

Home Phone: _____ Work Phone: _____ Email: _____