CITY OF BOZEMAN, MONTANA
APPLICATION FOR THE BOARD OF ETHICS

Date:_____

Name: _____

Physical Address: _____
Mailing Address (if different): _____
Email: _____
Phone(s): _____

Length of time in the Bozeman area: _____

Occupation: _____
Employer: _____

Are you an appointed or elected official for the City of Bozeman? YES NO

Are you currently serving on a board(s) and if so which board(s)? YES NO

Have you ever served on a City or County board in the past? YES NO
(If so, where, what board, and how long?)

Please explain your relevant qualifications, interests, and experiences.

References (Individual or Organization) Name: Phone:

_____ _____

_____ _____

_____ _____

This application is considered public record. Application contact information may be displayed on the City of Bozeman website.

PLEASE NOTE: Per Ordinance No. 1759, revising Chapter 2.01 of the Bozeman Municipal Code, all board members are required to attend a yearly ethics workshop provided free of charge by the City as a condition of service as a member of a board.