

CITY OF BOZEMAN, MONTANA  
APPLICATION FOR THE BEAUTIFICATION ADVISORY BOARD

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

Name: \_\_\_\_\_

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

Mailing Address (if different): \_\_\_\_\_

Email: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Length of time in the Bozeman area: \_\_\_\_\_

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

Employer: \_\_\_\_\_

Have you ever served on a City or County board? \_\_\_\_\_  
(If so, where, what board, and how long?)

Please explain your relevant qualifications, interests, and experiences.

References (Individual or Organization) Name:

Phone:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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.