

Poarch Band of Creek Indians



Board/Committee/Authority/Commission Application

An individual may not serve on more than two (2) boards, committees, etc. at one time.

Applicants must receive and read a copy of the Board and Committee Organization Act prior to submitting their application. A copy of the Act is available at the Tribal Council Offices or may be downloaded from the Tribal website, www.pci-nsu.gov. Please complete and sign your application; incomplete applications may not be considered.

Name: _____ Tribal Roll# (if applicable) _____

Date of Birth: _____ Email: _____

Telephone /Contact Number: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Employer: _____ Contact Number: _____

Address: _____

City: _____ State: _____ Zip Code: _____

1. I do not serve on any board, committee, authority, commission, etc.
2. I currently serve on the following boards, committees, authorities, commissions, etc:
 1. _____
 2. _____
3. I hereby submit my application to serve on the following boards, committees, authorities, commissions, etc.: **(If you are applying for PCIGA, CIEDA, or Utilities, you MUST submit a resume reflecting your qualifications for consideration for the position.)**
 1. _____
 2. _____
 3. _____
 4. _____

Do you have an immediate family member who is an employee of or a board member for the entity whose board, committee, authority, commission you are applying for? _____ Yes _____ No
If yes, in what capacity does your immediate family member serve the entity?

Do you have a contractual or business relationship with the entity whose board, committee, authority, commission, etc. you are applying for? _____ Yes _____ No
If yes, please describe the relationship.

Application continued on next page.

Qualifications/Accomplishments

Please list any qualifications/accomplishments that you may have; briefly state why you would like to be considered for a position on this/these board(s), committee(s), authority(s), commission(s), etc.

Acknowledgement

I hereby acknowledge that I may only serve on two (2) boards/committees at one time. I also acknowledge that I have received and read a copy of the Board and Committee Organization Act. I understand and agree to the restrictions placed on me under the Act.

Applicant Signature Date

For internal use only:

Date Received: _____ Received by: _____

Method of receipt:

Email via interactive application _____

USPS Mail _____ Interoffice Mail _____

Hand Delivery _____ Other _____