



STATE OF COLORADO

APPLICATION FOR BOARDS AND COMMISSIONS
OFFICE OF THE GOVERNOR

FOR OFFICE USE ONLY

Please attach a current resume

BOARD OR COMMISSION FOR WHICH YOU ARE APPLYING:

BAS
BC 1
BC 2
BC 8

Name (Last, First, Middle)	County	Cong Dist	Senate Dist	House Dist
Home Address	City		State	Zip Code
Date of Birth (MM/DD/YYYY)	Gender M F	Registered Voter? Yes No Party Affiliation Dem Rep Un	Race (Optional) African American Asian Hispanic Native American Caucasian	
Present Employer—Occupation	Business Phone No. ()		Home Phone No. ()	
Business Address	E-mail Address			

EDUCATION AND GENERAL QUALIFICATIONS

LEVEL	NAME OF SCHOOL	LOCATION	No. Years Attended	Did You Graduate?	Major Course(s) of Study
High School					
College					
Trade/Business/Correspondence					
Memberships in Organizations And Offices Held (Indicate if Past or Present)					
Volunteer Activities (Indicate if Past or Present)					
Special Skills and Qualifications					

REFERENCES (List three persons, not related to you, who you have known for at least one year.)

NAME	ADDRESS	PHONE NO.

Is there anything in your background that might be an embarrassment to the Governor or you if it were to become public?
YES NO (If YES, please explain in attachment to this application.)

I certify that the facts contained in this application are true and correct to the best of my knowledge. I authorize investigation of all statements contained herein and the references listed above to obtain any and all pertinent information, personal or otherwise. I further authorize the Office of the Governor to conduct a criminal background check, including requesting a criminal history from the Colorado Bureau of Investigation. I release all parties for all liability for any damage that may result from furnishing such information.

I understand that the Colorado Open Records Act may require that certain information contained in this application be available for inspection by the general public.

RETURN COMPLETED FORM TO:
 Shaylisa Hurte, Director
 Governor's Office of Boards & Commissions
 136 State Capitol Bldg.
 Denver, CO 80203
 Fax: (303) 866-6368

SIGNATURE _____

DATE _____