City of Phoenix

CITY OF PHOENIX CIVILIAN REVIEW BOARD

APPLICATION FOR NOMINATION TO BOARD

APPLICATION INSTRUCTIONS

Thank you for your interest to serve on the City of Phoenix Civilian Review Board. Please read these instructions carefully and submit any questions about the application or the nomination process to boards.and.commissions@phoenix.gov

1. This application is a public record. As a public record, information denoted as "Public Information" is available for public inspection and may be posted on the City of Phoenix website. Public Information includes the applicant's name, occupation, employer, relevant work history, other responses contained in this application, and any other information that is specifically authorized for release by the source of the information. Applicant's personal address, email, and phone denoted as "Personal Information" are confidential and not available for public inspection. Completed applications, including the confidential portion, are forwarded to the City Council upon nomination.

2. The electronic form is a fillable PDF, which may be completed using Adobe Acrobat Reader. All information should be typewritten. Some questions permit a limited response. If additional space is needed, attachments may be added to the application. To obtain a form, email your request to boards.and.commissions@phoenix.gov or download from the Board and Commissions website at https://boards.phoenix.gov/Home/BoardsList.

3. Completely answer all questions. If a question does not apply, write "Not applicable" in the space provided. If information is not available, write "Not available" and state the reason(s) the information is not available.

SUBMITTAL PROCEDURES

APPLICATIONS ACCEPTED ON A ROLLING BASIS. APPOINTMENTS WILL BE MADE AS VACANCIES OCCUR.

Complete applications include an electronic or hard copy application and additional documentation (if applicable).

You may file the application electronically or by hard copy. To file an electronic application, email the completed application to boards.and.commissions@phoenix.gov. To file a hard copy, applications may be completed, printed, and either mailed or delivered to the following address: **City of Phoenix Office of Accountability and Transparency, 350 W. Jefferson Street, Phoenix, AZ 85003.**

The Board cannot be responsible for applications not received; if the U.S. mail is used, applications should be sent by registered or certified mail, return receipt requested. If you would like acknowledgment of receipt of the application, enclose a self-addressed, stamped envelope.

CLEAR FORM

City of Phoenix

CITY OF PHOENIX CIVILIAN REVIEW BOARD

APPLICATION FOR NOMINATION TO BOARD

PUBLIC INFORMATION

FULL NAME:	
CONTACT ADDRESS (INCLUDING ZIP):	
CONTACT EMAIL:	**CONTACT PHONE:**
IS YOUR CONTACT INFORMATION: Business ◯ OR Personal ◯	
EMPLOYER:	**TITLE:**
EMPLOYER ADDRESS (INCLUDING ZIP):	

1. STATEMENT OF INTEREST

In 500 words or less, please state why you are interested in serving on the City of Phoenix Civilian Review Board. If relevant, please describe whether you have any specialized knowledge of ADA, mental or behavioral health, or any other issues that would enhance your ability to serve as an effective voice on the Board.

2. EMPLOYMENT HISTORY

Please attach resume or provide a list of employers, including any work done as a volunteer, during the last 10 years. For each employer, list the job title and address along with the name, phone number, and/or email address for your supervisor.

3. EDUCATION

Please list all post-high school education, including the name of the educational institution, years of attendance, and degree obtained.

4. PROFESSIONAL AND/OR COMMUNITY OR PUBLIC SERVICE ACTIVITIES

Include date(s) of service and, if applicable, title of office(s) held.

5. POLITICAL ACTIVITIES

Please provide a list of any political activities that you have engaged in over the last 10 years.

6. Do you have substantial business interests with the City of Phoenix?

Yes ☐ OR No ☐ **If yes, please describe.**

7. Are you a relative of a City of Phoenix employee or Phoenix elected official?

Yes ☐ OR No ☐ **If yes, please describe.**

8. Is there any possible conflict of interest or other matter that could prevent you from the fair and impartial discharge of your duties as a member of the City of Phoenix Civilian Review Board?

Yes ☐ OR No ☐ **If yes, please describe.**

AFFIRMATION OF ELIGIBILITY

1. Are you a current Phoenix resident? Yes ◯ OR No ◯
2. Are you currently employed in Phoenix? Yes ◯ OR No ◯
3. Are you 21 years of age or older? Yes ◯ OR No ◯
4. Are you currently or have you ever been a sworn law enforcement officer? If yes, please describe. Yes ◯ OR No ◯

5. Do you have a pending claim or lawsuit or preceding this appointment have you filed a claim or lawsuit related to action by the Phoenix Police Department? If yes, please describe. Yes ☐ OR No ☐

OPTIONAL SECTION

The City of Phoenix strives for diversity among board, committee, and commission members. In this optional section, please provide us with information to help us evaluate our progress in achieving this goal.

RACE/ETHNICITY (Select all that apply)	✓
White (Non-Hispanic)	
Asian (Non-Hispanic)	
Hispanic	
American Indian/Alaskan Native	
Native Hawaiian/Other Pacific Islander	
Black (Non-Hispanic)	
Other	
Decline to State	

REQUIRED SIGNATURE

Under penalty of perjury, I certify the information contained in this application is true, complete, and correct to the best of my knowledge. I authorize investigation of all information in this application and considered by the City for possible appointment to the Civilian Review Board. As a candidate for appointment to the City of Phoenix Civilian Review Board, I understand that I must give truthful and accurate information as requested during the review process. I understand this application and supporting information may be filed electronically or by hard copy. If filed electronically, I understand the City may require additional information by written or printed copy. I acknowledge and agree appointment to the Civilian Review Board is contingent upon the results obtained through a background check and screening.

SIGNATURE: _____ **DATE:** _____

Note: Typing your name acts as your signature.