



COMMUNITY PLAN ADVISORY COMMITTEE (“CPAC”) APPLICATION

(Please print or type)

Name: _____
(Last) (First) (Middle)

City or Town of Residence: _____ **CPAC for which you are applying:** _____

Why do you want to serve on the CPAC? What knowledge or experience will you bring to the Community Plan update process?
(50 words or less)

Describe your desired vision of the relevant Community Plan area in 20 years: (50 words or less)

Post-Secondary Education:

Brief Employment Summary (previous 10 years, current or most recent first):

<u>Start</u>	<u>End</u>	<u>Position/Responsibilities</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Community and Professional Organizations/Activities:

Political Affiliation: _____

Section 13-2(2) of the Charter, County of Maui, requires that not more than a bare majority of members of a board or commission belong to the same political party; therefore, please indicate political-party membership, if any.

Consent to be Nominated and Certification of Truthfulness and Accuracy of Information:

I declare that the above statements are true and accurate to the best of my knowledge.

Signature: _____ **Date:** _____

NOTE: Upon submission, page 1 of this application will be made available to the public for viewing and copying.

Resumes and letters of recommendation may also be attached to completed applications, or may be submitted separately in the form of written testimony to the Committee. All testimony and other correspondence should reference POL-27.

Please mail or deliver completed applications to **POLICY COMMITTEE POL-27, C/O OFFICE OF COUNCIL SERVICES, 200 SOUTH HIGH STREET, WAILUKU, HI 96793** or fax to **270-7686**. For further information, call 270-7838; on Lanai, call 1-800-272-0098; and on Molokai, call 1-800-272-0026.

