OREGON FIRE SERVICE OFFICE ADMINISTRATORS

EVENT PLANNING COMMITTEE INTEREST FORM

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**District/Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years in OFSOA:\_\_\_\_\_\_\_\_\_\_\_\_**

**Position:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please submit a short narrative regarding your experience and interest which relate to your desire to serve on the event planning committee. **Please be specific about any prior events you** **have planned or been a part of planning, or any specific skills.**

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I have read the position descriptions and am interested in being considered as a:

Sr Member\_\_\_\_\_\_\_\_

Jr Member\_\_\_\_\_\_\_\_

I understand and acknowledge being appointed to this committee will require time and dedication outside of my normal employment duties.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature Date

We approve and support our applicant’s involvement on this committee for the Oregon Fire Service Office Administrators for the term.

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Signature of Applicants Authority Date