



CITY OF **DOUGLAS** WYOMING  
HOME OF THE JACKALOPE.

# Volunteer Application

Return to: 101 N. 4<sup>th</sup> Street / P.O. Box 1030  
Douglas, WY 82633  
307-358-3462, Fax: 307-358-6447

Name of Applicant: amanda smylie

Address: 925 smylie rd City/State/Zip: douglas wy 82633

Mailing Address (if different from above): \_\_\_\_\_

Home Phone:	Cell Phone: <b>3073593332</b>	Work Phone:	Email: <b>ajsmylie@gmail.com</b>
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1. Are you a resident of the City of Douglas?  Yes  No

2. I am interested in serving on the following Boards/Commissions (*Please all that apply*):

**Boards/Commissions/Committees:**

- Douglas Planning & Zoning Commission/Board of Adjustments
- Historic Preservation Commission
- Converse County Tourism Promotion Board
- Douglas Housing Authority Board
- Federal Urban Systems Advisory Committee
- Douglas Board of Appeals
- Steering Committee Member (when applicable)
- Focus Group Member (when applicable)
- Community Facility Task Force
- Arts & Culture Board of Trustees
- Recycling Task Force
- Other: \_\_\_\_\_

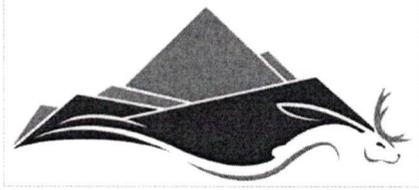
3. Have you served on any of these Boards/Commissions previously?  Yes  No

4. If "Yes", please indicate which Boards/Commissions and when you served: \_\_\_\_\_

**arts and culture**

5. In what community/communities did you previously serve? \_\_\_\_\_

**converse**



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6. In what position(s) would you be willing to serve? *(Please select all that apply.)*

- Chairperson
- Vice Chairperson
- Secretary
- Treasurer
- Board, Commission, or Committee member only

7. Do you understand the attendance requirements as provided per Douglas Municipal Code and/or the Bylaws of the Board or Commission you wish to serve on?  Yes  No

8. If "No", please provide a description of your question(s): I work in casper every wednesday and will arrive to meetings once in town or after my last patient

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9. Why are you seeking this appointment(s)? I was previously on this board and would like to continue to help see our community grow with art and culture

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amanda smylie

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Signature of Applicant

7/18/24

Date

For Office Use Only:
Selected for: _____
Length of Term/Dates: _____
Additional Information: _____
_____
_____