



# Board of Commissioners

Courthouse, Room 110  
225 W. Olive Street  
Newport, Oregon 97365  
(541) 265-4100  
FAX (541) 265-4176

## APPLICATION

Name of Committee, Commission or Board:

Please check one:

**VETERANS' SERVICES ADVISORY COMMITTEE**

\_\_\_\_\_ NEW APPLICANT

\_\_\_\_\_ REQUEST FOR REAPPOINTMENT

\* \* \* \* \*

NAME: \_\_\_\_\_  
Please print

HOME ADDRESS: \_\_\_\_\_  
P.O. Box/Street No. City State Zip Code

HOME PHONE: \_\_\_\_\_ HOW LONG HAVE YOU LIVED IN LINCOLN COUNTY? \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_  
P.O. Box/Street No. City State Zip Code

E-MAIL ADDRESS: \_\_\_\_\_

BRANCH OF SERVICE: \_\_\_\_\_

YEARS AND DATES SERVED: \_\_\_\_\_

TYPE OF DISCHARGE: \_\_\_\_\_

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1. Please give a brief description of the experience, training, special interest or involvement in the community that supports your nomination to this committee. If you wish, you may attach a resume or other material.

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