



Application for appointment to a Board, Committee, Commission, or Task Force

DATA CLASSIFICATION ADVISORY

Some of the information on this form is public data under the Minnesota Government Data Practices Act, Minn. Stat. Chapter 13. The data is being requested so that the appointing authority can make an informed decision as to the appointment to the relevant board, commission, committee or task force. An applicant is not required to provide any information; however, failure to answer any of the questions on this application may cause the appointing authority to reject the application or to select another candidate. The data on this form will be maintained by the City of Minneapolis in accordance with the Minnesota Government Data Practices Act and the non-public portions of the form, if any, will be available to individuals working for the City whose work assignments reasonably require access.

We also request that you complete the **voluntary demographic questionnaire**. The City of Minneapolis has made efforts to increase diversity on boards and commissions. Knowledge of your status will assist us in monitoring the success of our efforts. Although you are not required to provide the information requested on the demographic questionnaire, your cooperation is appreciated and valued. The information provided is not used in determining appointments to boards and commissions. Please find the form in MS Word and in PDF.

THE INFORMATION PROVIDED ON THIS PAGE IS OPEN TO THE PUBLIC PER THE MINNESOTA DATA PRACTICES ACT

Title of the Board, Commission, Committee, or Task Force this application is for

Name:	Ward:
City of residence:	

Occupation:	Employer:
Employer's Address:	

Describe your background related to any required or desirable qualification listed in the Notice. Include applicable experience with civic, professional or volunteer organizations and other city boards or commissions. List any awards or special recognition.

Return completed applications to:
Email openappointments@minneapolismn.gov
Mail or delivery City Clerk Appointments
Room 304, 350 S. 5th St
Minneapolis, MN 55415-1382
Fax 612-673-3812

THE INFORMATION PROVIDED ON THIS PAGE IS **PRIVATE** PER THE MINNESOTA DATA PRACTICES ACT

ADDRESS*:		ZIP +4:
Home and/or Wireless Telephone Number*:	Work Telephone Number*:	Fax:
E-Mail Address*:		

***NOTE: If appointed, Minnesota Statute 13.601 requires that a telephone number and/or an e-mail address where the appointee can be reached and residential address will be considered public data.**

List the reasons you want to serve on this body:

List issues you believe the committee should address:

List names, addresses and telephone numbers of no more than 3 references		
Name	Address	Phone Number

List any financial interests (where required) or associations with which you are involved that may present a conflict of interest:

Signature:	Date:
-------------------	--------------

CONFIDENTIAL
VOLUNTARY DEMOGRAPHIC QUESTIONNAIRE

TO BE COMPLETED BY APPLICANT. The City of Minneapolis has made efforts to increase diversity on boards and commissions. Diversity for purpose of this form includes: racial, economic, age, gender, geographic, sexual orientation, ownership, disability, and education attainment. Knowledge of your status will assist us in monitoring the success of our efforts. **Although you are not required to provide the information requested on this form, your cooperation is appreciated and valued. The information provided is kept confidential and when reported, will not identify any individual. In addition, the information provided is not used in determining appointments to boards and commissions.**

Title of the Board, Commission, Committee, or Task Force this questionnaire is for: _____

HOW DID YOU HEAR ABOUT THIS BOARD OR COMMISSION VACANCY?

- City of Minneapolis Website News release from local media Neighborhood or Community Organization Newsletter
 Boards & Commissions Subscribed Email Ward Newsletter Personally Invited to Apply
 Other, **please explain here** _____

Do you own or rent? OWN RENT

How long have you lived in your current home?
Number of years _____

Which category represents your age?
 18 to 24 years 25 to 39 years 40 to 54 years
 55 to 64 years 65 +

Are you living with a disability? If you answer no, skip over next question YES NO;
If you answered yes to previous question, into which of the following categories does your disability fall? Mobility
 Sight Hearing Speech Developmental
 Other (please specify): _____

Race/Ethnicity (Select one)
 Hispanic or Latino – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. Not Hispanic or Latino
 American Indian or Alaska Native – A person having origins in any of the original peoples of North, Central, or South America or who maintains tribal affiliation or community attachment.
 Asian – A person having origins in any of the of the Far East, southeast Asia, or the Indian subcontinent; including, for example Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
 Black or African American – a person having origins in any of the Black racial groups of Africa.
 Native Hawaiian or Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
 White – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
here _____)
 Other, if marked, please indicate ethnicity here _____.

How do you self-identify? Male Female;

How do you self-identify?
 Heterosexual Gay, Lesbian, Bisexual, Transsexual, Transgender

What was your total household income in the previous year before taxes? Less than \$25,000 \$25,000 - \$49,000
 \$50,000 - \$74,999 \$75,000 - \$124,000
 \$125,000 - \$199,999 \$200,000 +

Are you a registered voter? YES NO

Do you live in Minneapolis? YES NO

Which ward do you live?
 1, 2, 3, 4, 5, 6, 7, 8, 9, 10,
 11, 12, 13; Other City _____

What is your employment status? Please check all that apply.
 Employed – full time Employed – part time
 Full time student Unemployed Self-employed
 Homemaker Retired Other _____

What is the highest level of education you have completed?
 Some high school High school or GED
 Some technical school Technical school graduate
 Some college College graduate Post graduate
 Other _____

Thank you for your participation!

Please return your completed form to:

Email: openappointments@minneapolismn.gov

Mail or delivery City Clerk Appointments
Room 304, 350 S. 5th St
Minneapolis, MN 55415-1382
Fax 612-673-3812