

# City of Burlingame Board Membership Application

Name: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

e-mail: \_\_\_\_\_

Check the following board you would be willing to serve on. Please fill out a separate sheet for each board you wish to serve on.

Board of Zoning Appeals

Planning and Zoning Commission

Please explain why you would like to serve on this board.

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Please attach a resume or any related experience that may apply.

Date submitted: \_\_\_\_\_