

Information on this form will be shared with other members of the Board, agency staff and the public. If you wish your address information to be kept confidential, please check this box.

Alaska State Parks



Application for Appointment to Citizens Advisory Board

Last Name		First Name		MI
Permanent Mailing Address		City	State	Zip Code
Permanent Residence Address		City	State	Zip Code
Business Phone	Cell Phone	Home Phone	Email Address	

Advisory Board you are applying for: Mat-Su Chugach Northern Kodiak Wood-Tikchik

Kenai - Valdez Kachemak Bay South Peninsula Kenai River SMA **Southeast -** Ketchikan Juneau Sitka

Education/training/expertise you would bring to this board:

What do you want to achieve as a member of this board?

Amount of time you are willing to spend on board business each month 2 hrs 3 hrs 4 hrs 5 hrs 6+ hrs

Areas of interest:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> park planning/acquisitions | <input type="checkbox"/> field work in parks | <input type="checkbox"/> tourism | <input type="checkbox"/> grant writing |
| <input type="checkbox"/> site planning/development | <input type="checkbox"/> legislation | <input type="checkbox"/> historic preservation/research & writing | |
| <input type="checkbox"/> resource protection/conservation | <input type="checkbox"/> budget/funding | <input type="checkbox"/> public education | |

Types of recreation you are most interested in:

- | | | | | |
|---|--|--|---|--------------------------------------|
| <input type="checkbox"/> snowmachining | <input type="checkbox"/> skiing/snowboarding | <input type="checkbox"/> canoeing/kayaking | <input type="checkbox"/> hunting/trapping | <input type="checkbox"/> other _____ |
| <input type="checkbox"/> all-terrain vehicles | <input type="checkbox"/> snow-shoeing | <input type="checkbox"/> hiking/biking | <input type="checkbox"/> fishing | <input type="checkbox"/> _____ |
| <input type="checkbox"/> motorized boating | <input type="checkbox"/> dog mushing | <input type="checkbox"/> trails | <input type="checkbox"/> camping | <input type="checkbox"/> _____ |

Volunteer Experience:

Occupation	Employer	Location
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Current Organizational Affiliations

Estimated number of visits to state parks in a year:	Which parks do you visit most often?
Are you a property owner within/adjacent to any state park unit? YES NO Where? _____	
Are you a resident within/adjacent to any state park unit? YES NO Where? _____	
Do you perform any commercial activities within a state park unit? YES NO Business Name _____	

REFERENCES (Please list at least 2 personal/work or business references)

Name	Address	Phone Number

Alaska State Parks Citizens Advisory Board Candidate Questionnaire

Name	Date
Please provide brief answers to the following questions to guide us in the selection of new board members for the State Parks Citizens Advisory Board.	
1. How would you be an effective board member?	
2. Describe any experience you have had working with other committees, boards or commissions?	
3. Can you make the voluntary commitment of time to be available for all meetings during the year (meeting schedule varies by location)? If you cannot attend all meetings, please explain.	
4. It is important for Board members to represent their constituencies effectively. Describe how as a Board member, you would solicit public input to help advise on park management decisions.	
5. Do you have any other comments to share with the reviewing committee?	
6. CONFLICT OF INTEREST: Do you have any possible conflicts of interest with the Department of Natural Resources or the Division of Parks & Outdoor Recreation that would give you, as an applicant, any direct financial or other type of gain? If so, please explain.	
Signature	Date