## **GONZALES COUNTY BOARDS, COMMITTEES, AND COMMISSIONS REAPPOINTMENT FORM**

As an applicant for a County board, committee, or commission, the information on this form may be available in accordance with the guidelines of the Texas Public Information Act. You have the right to request the exclusion of certain information from public access.

Certain boards may have additional qualification requirements.

Board/Committee/Commission Name:	
Do you wish to be considered for reappointment: Y  If you select N for no, please sign and date and return this form to	N the County Judge.
Name:	
Mailing Address:	
City, State & Zip:	
Phone Number: Em	nail:
How long have you served on this Board/Committee/Commiss	sion
Please state why you wish to be reappointed.	
I, the undersigned, hereby request consideration for the commission of Gonzales County. I affirm that all inform and complete and that any misrepresentation, falsiful relinquishing my role as a volunteer for Gonzales County	ation contained in this application is true ication, or omission shall be cause for
SIGNATURE:	<u> </u>
DATE:	

Return Application to the Gonzales County Judge's Office, 414 St. Joseph St., Suite 200, Gonzales, Texas 78629

or e-mail to countyjudge089@co.gonzales.tx.us

Submitted applications will be forwarded to Commissioners Court for consideration and are also available to the public under the guidelines of the Texas Public Information Act.