

**SOUTHEAST TEXAS WATERWAYS ADVISORY COUNCIL
MEMBERSHIP APPLICATION**

Date of Application:

Name:

Last

First

Middle

Address:

Street

City, State

Zip

Contact Information:

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Business Telephone

Mobile

Email

Employing Organization:

Occupation or Title:

List Membership and/or Title of Any Other Advisory Committees (Past or Present):

Board Position Interested In:

*Members of the Managing Board, who are not designated permanent members by virtue of their agency or organization position, serve initial three year terms and are eligible to serve one additional three year term, if re-elected by the voting members of the Managing Board. Members of the Managing Board and their alternates are expected to attend and participate in scheduled meetings.

Candidate's Signature:

Date:

PRIVACY ACT STATEMENT

Information requested on this form is made under provisions of P.L. 93-579 of the Privacy Act of 1974. It is to be used as background information for prospective members of advisory committees. At your request, we will disclose to you the identity of any person or organization to who we release such information.