



Committee Appointment Form

Print Name _____

Address _____

City _____

Phone No. _____

Cell No. _____

Email _____

Fallon Tribal Member? Yes # _____ No

Check One Box Only

Committees List

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Constitution & Bylaws | <input type="checkbox"/> Cultural |
| <input type="checkbox"/> Enrollment | <input type="checkbox"/> Education |
| <input type="checkbox"/> Law & Order | <input type="checkbox"/> Health |
| <input type="checkbox"/> Natural Resources | <input type="checkbox"/> Wildlife |
| <input type="checkbox"/> Special Events | <input type="checkbox"/> SF Invest. |
| <input type="checkbox"/> Other _____ | |

Special Committees List

- | |
|--|
| <input type="checkbox"/> Housing Board |
| <input type="checkbox"/> TERO Commission |

1. Please list any qualifications you may have to serve on this Committee:

2. Have you served on this Committee before? Yes No When? _____

Explain: _____

3. Do you use the services provided by this Committee, Program, or Department?

Yes No Explain: _____

4. Do you owe any debts to the Tribe? Yes No

Court & Probation Health Clinic Housing Authority

Law Enforcement Tribal Resources Water & Sewer

Other _____

Explain: _____

Signature _____

Date _____

OFFICE USE ONLY

Notes: _____