

SUBJECT: Planning Commission Appointment

REQUESTED BY: Mayor Palin

PREPARED BY: Administration

DATE: February 22, 2001

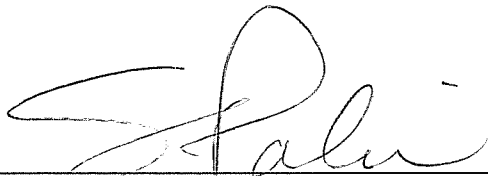
FOR AGENDA OF: February 26, 2001

SUMMARY:

I respectfully ask Council to confirm my appointment of Sharla Terrill to the Planning Commission.

FISCAL IMPACT: No Yes, amount requested: \$ Fund:

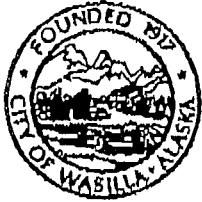
RECOMMENDED ACTION: Appointment of Sharla Terrill to the Wasilla Planning Commission.



Reviewed by: SARAH PALIN, Mayor

Attachments: Commission Application Form

Presented to council on 2/26/01
Action taken: Approved Denied
other _____
Verified by W.



CITY OF WASILLA
290 E. HERNING AVE.
WASILLA, ALASKA 99654-7091
PHONE: (907) 373-9055
FAX: (907) 373-9096

SARAH PALIN
MAYOR

COMMISSION/COMMITTEE/BOARD APPLICATION FORM

Note: This application is public information.

NAME: Sharla Terrill
MAILING ADDRESS: P O Box 873547, Wasilla, AK 99687
RESIDENCE PHYSICAL ADDRESS: 785 Sam Snead Lp. S., Wasilla
HOME PHONE: 376-3419 WORK PHONE: 373-3570
POSITION APPLYING FOR: _____
OCCUPATION: Secretary
EMPLOYER: Mat-su Bor. School District
EDUCATION AND EXPERIENCE RELATED TO VOLUNTEER POSITION BEING APPLIED FOR: Lived in Wasilla since 1993. I have been active in the community volunteering and working at local schools. Have been involved with the PTA.

Are you a registered voter in the state of Alaska? Yes No
Do you reside in the city of Wasilla? Yes No
FAMILY: Spouse's Name: David J. Terrill
Children's Name(s): Keesha Terrill

Name any goals or interests that you would like to pursue upon appointment and confirmation.
Would like to see a strong infrastructure supporting roads, fire prevention and police protection to support the growth of our community. And somehow keep our community a safe and wonderful environment to raise our families.

Do you understand that this is a voluntary appointed position to be confirmed by the City Council, and requires regular attendance at official meetings? Yes No

Signature: Sharla Terrill Date: 2/20/01

Thank you for your application. We appreciate the interest you have shown in your community by applying for this position.

For Office Use Only

Date Received: _____ Mayor's Review Date: _____
Council Approval Date: _____ Notice of Appointment Date: _____