



CITY OF ADAK, ALASKA

City Council Vacancy Appointment Application

The purpose of this statement is to provide information about candidates for the City Council.

Name _____ Phone Number _____

Address _____

Email _____

Length of Residence in our Municipality _____

Tell us a little about yourself and your interest on the city council.

Give your opinion of the strengths and weaknesses of our city? What are your goals for improving our community?

Our council traditionally meets twice per month (one workshop and one meeting) and additionally as necessary, approximately 2-3 times per year. Can you make a commitment to attend the meetings of the city council as well as potential training opportunities? Circle.

YES

NO

Any other details you would like to share?

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To qualify to serve as a city council member, a candidate must be a qualified city of Adak voter and resident of Adak for 30 days immediately preceding the appointment.

I, _____, confirm that I am a resident of Adak and have been an Adak resident for _____. I am also qualified to vote under Alaska Statute 29.26.050(a).

Signature of Candidate _____

Date _____

If you have questions about the position or the role of our City Council, please contact our City Manager, Layton J. Lockett at manager@adak-ak.gov or 907-592-4500.

Please submit your application to clerk@adak-ak.gov, mail to PO Box 2011, or drop off at the Adak City Office during open hours.