

## Application for Appointment to the Planning Commission/Board of Adjustment

SUBMISS	SION DEADLINE	January 23, 2026 at 4:30 p.m.
APPLICANT INFORMATION		
Name		
Address		
City, State, ZIP		
Email Address		
Phone Number	CELL	BUSINESS
Occupation		
Do you own a business in the	YES	IF YES, NAME OF THE BUSINESS
City of Castle Pines?	NO	
PLEASE TYPE OR PRINT CLEARLY		
Commissioner/E	Board of Adjustment Memb	ing reappointed as) a Planning er for the City of Castle Pines?
2. What experience of Adjustment?	e or training do you have th	nat relates to the Planning Commission/Board

3. What personal qualifications or skills do you have that will be of value to the City of Castl Pines should you serve as a Planning Commissioner/Board of Adjustment Member?		
4. What do you feel are the most important concerns or issues that relate to the Planning Commission/Board of Adjustment?		
5. Please list any experience with community groups and activities or municipal committees and boards. Lack of previous involvement will not necessarily disqualify you from consideration.		
CITY OF CASTLE PINES POLICIES		
City of Castle Pines employees may not serve on City advisory committees, except as specifically provided by City resolution or as required to perform official City duties.		
Information submitted on this application form shall be considered public information.		
Signature of Applicant Date		