



City of Princeton

Application for Commission or Board

DATA CLASSIFICATION ADVISORY: Please be advised that the information that you are requested to provide is classified as private data pursuant to Minnesota Statute 13.43 except for the following data which is classified as public data: (1) name; (2) city of residence except when the appointment has a residency requirement that requires the entire address to be public; (3) education and training; (4) employment history; (5) volunteer work; (6) awards and honors; (7) prior government service.

If you are appointed to a position on a board or commission, the following additional data will be classified as public data: (1) residential address; (2) either a telephone number or electronic mail address where the appointee can be reached, or both at the request of the appointee. Any electronic mail address or telephone number provided by the city for use by an appointee shall be public. An appointee may use an electronic mail address or telephone number provided by the public body as the designated electronic mail address or telephone number at which the appointee can be reached.

APPLICANT'S NAME:

Moller
Last Name

Scott
First Name

F.
Middle Initial

FOR WHICH BOARD(S)
ARE YOU APPLYING?:

AIRPORT ADVISORY BOARD _____
CABLE TV BOARD _____
ECONOMIC DEV. AUTH. _____

HRA BOARD _____
PARK & REC BOARD _____
PLANNING COMMISSION X

PUBLIC UTILITIES COMMISSION _____
TREE BOARD _____

HOME ADDRESS: 2779 SOFH AVE PRINCETON, MN 55371

WORK PHONE: 612-272-0095

HOME PHONE: _____

CELL PHONE: 612-272-2913

EMAIL: MOLEFCPA@GMAIL

HOW LONG HAVE YOU LIVED IN PRINCETON?: 23 YEAR

WHAT INTERESTS YOU ABOUT BECOMING A MEMBER OF THIS COMMISSION OR BOARD?

I have served the past 3 years. I would like to continue to serve to assist the growth and development of Princeton.

PLEASE PROVIDE ADDITIONAL INFORMATION THAT YOU BELIEVE IS IMPORTANT IN CONSIDERING YOUR APPLICATION:

(Additional information may be written on the back or on a separate sheet)

I HEREBY ATTEST THAT:

X I have read and understand the Data Classification Advisory above.

X I have sufficient time to devote to this responsibility and will attend the required meetings if appointed.

SIGNATURE

Scott Moller

DATE

12/2/20

OFFICE USE ONLY

Date Received

Appointment Date

Appointed:

☐ Yes ☐ No

Term End Date