



DATE: \_\_\_\_\_

**TOWN OF DOUBLE OAK  
320 WAKETON ROAD  
DOUBLE OAK, TEXAS 75077  
(972) 539-9464**

**APPLICATION FOR COUNCIL LIAISON APPOINTMENTS**

As an applicant for a Council appointment, your name, address and telephone number will be available to the press and the public if you elect to disclose this information. All other information will remain confidential.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

OCCUPATION: (If retired, please indicate former occupation or profession)  
\_\_\_\_\_

PROFESSIONAL AND/OR COMMUNITY ACTIVITIES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

LIST QUALIFICATIONS YOU FEEL MAKE YOU A GOOD CANDIDATE FOR THIS POSITION AND INCLUDE PREVIOUS VOLUNTEER POSITIONS:  
\_\_\_\_\_  
\_\_\_\_\_

REFERENCES: \_\_\_\_\_  
\_\_\_\_\_

MAIL COMPLETED FORM TO: TOWN OF DOUBLE OAK  
TOWN SECRETARY  
320 WAKETON ROAD  
DOUBLE OAK, TEXAS 75077

OR FAX / E-MAIL TO: FAX (972) 539-9613  
EMAIL: [eileen.kennedy@doubleoak.texas.gov](mailto:eileen.kennedy@doubleoak.texas.gov) or  
[lynn.jones@doubleoak.texas.gov](mailto:lynn.jones@doubleoak.texas.gov)