

FRANKLIN COUNTY, WASHINGTON

Volunteer Board / Committee Application (Exhibit A) Resolution 2025-

Return to: Franklin County Commissioners Office, 1016 N. 4th Ave, Pasco, WA 99301 • Phone: (509) 546-5855 • Email: CommissionersOffice@franklincountywa.gov

1) Board/Committee of Interest

- Board/Committee name: _____
- Alternate option(s) you'd consider: _____

2) Applicant Information

- Full legal name: _____
- Preferred name (if different): _____
- Residential address (primary residence): _____
City/ZIP: _____
- Mailing address (if different): _____
- Phone: _____
- Email: _____
- Years residing in Franklin County: _____ I am a Franklin County resident.
(If a board allows non-residents per statute or interlocal, indicate basis here):

3) Eligibility (check all that apply)

- I am at least 18 years old (unless the board allows youth members).
- I can attend meetings regularly and comply with the **Open Public Meetings Act (OPMA)**.
- I acknowledge that board records may be **public records**.
- If appointed, I will complete the required training within the statutory timelines.

4) Experience & Qualifications

- Current occupation/employer (or “retired”/“student”): _____
- Relevant education, licenses, or certifications: _____
- Prior or current service on public boards/commissions (list): _____
- Brief statement of interest and how you meet desired qualifications (attach resume if helpful): _____

5) Availability

- Typical availability (days/times): _____
- Are you willing to attend evening meetings if required? Yes No

6) Conflict-of-Interest & Ethics Disclosures

- Do you, your immediate family, or a business with which you are associated have a current or foreseeable **financial interest** in matters likely to come before this body?
 No Yes — Explain: _____
- Are you party to any contract with Franklin County or a subject agency?
 No Yes — Explain: _____
- List any affiliations that could reasonably be perceived as a conflict (nonprofits, vendors, advocacy groups, etc.):

7) References (optional, may be requested for certain boards)

- Name/relationship/phone/email: _____
- Name/relationship/phone/email: _____

8) Required Acknowledgements (initial each)

_____ **OPMA training.** I understand that members of governing bodies must complete OPMA training **within 90 days** of assuming duties and a refresher at least **every four years**.

_____ **Public Records.** I understand that application materials and board communications may be public records subject to disclosure and **must be retained** under state records-retention laws.

_____ **Ethics.** I will comply with Washington’s municipal ethics code, including restrictions on beneficial interests in contracts and use of office for private gain.

_____ **Nondiscrimination.** I understand the County does not discriminate or grant preferential treatment contrary to state law and welcomes broad participation consistent with applicable statutes.

_____ **Background check (if required).** I consent that, if the enabling statute or County policy requires, a background check may be conducted for this specific appointment.

9) Public Disclosure & Privacy Notice

Franklin County is subject to the **Public Records Act**. Some information you provide may be disclosed if requested, unless an exemption applies. Do **not** include Social Security numbers, driver’s license numbers, or sensitive medical/financial details.

10) Certification & Signature

I certify the information provided is true and complete to the best of my knowledge. I understand that misrepresentation may be grounds for removal.

Signature: _____ Date: _____

(For Office Use)

Received by: _____ Date: _____ Vacancy #: _____ Notes:
