

**TAYLORSVILLE CITY COUNCIL
AGENDA ITEM SUMMARY**

MEETING DATE: June 18, 2014

AGENDA ITEM: Appointment of Jeffrey Summerhays as Chair of the Green Committee

PUBLIC HEARING REQUIRED – YES ___ **NO** **X**___

RESOLUTION/ORDINANCE REQUIRED

ORDINANCE ___ **RESOLUTION** ___ **NONE** **X**___

PRESENTER: Council Chair Kristie Overson

ISSUE SUMMARY:

Appointment of Jeffrey Summerhays as Chair to the Green Committee

STAFF RECOMMENDATION:

CITY ATTORNEY (Approved as to form):

ACTION REQUIRED: Consider appointment of Jeffrey Summerhays as Chair to the Green Committee

ATTACHMENTS: Application



VOLUNTEER APPOINTMENT – APPLICATION

Name: Jeffrey Sean Summerhays Address: _____
City: _____ Zip: _____ E-Mail: jsummerhays@wasatchfrontwaste.org Phone: _____

Please see our city website at <http://www.taylorsvilleut.gov/about.volunteercommittees.html> for specific committee information to use in finding the committee that best fits your skill set

Consideration for appointment to (circle one):

Arts Council Budget Economic Development Green Committee Healthy Taylorsville
Historic Preservation Leisure Activities Recreation & Parks Ordinance Review Public Safety

1. What is your interest in this committee? I am the sustainability coordinator for WFWRD + want to help Taylorsville

2. What uniquely qualifies you for this committee? I have years of experience in recycling & sustainability

3. Please list any skills/talents, qualifications and/or experience that you feel directly relates to this committee: People skills / Masters of Science /

4. If the committee you are applying for is full:

4a) Would you be willing to apply for a different committee? (Please list your top 3 choices): no, I don't live in Taylorsville

4b) Would you like us to hold on to your application and notify you when there is an opening? Yes / No

4c) How would you like to be notified when a position becomes available on your first choice committee? (circle all that apply): Regular Mail Email Phone

NA

Date: 1/17/14

Signature: [Handwritten Signature]

Submitted for Approval:

By: _____ Date: _____
(Mayor or City Council Advisor)

Action by City Council: Approved Yes / No

Attest: _____ (City Recorder)