



Dave Heineman
Governor

STATE OF NEBRASKA

OFFICE OF THE GOVERNOR
P.O. Box 94848 • Lincoln, Nebraska 68509-4848
Phone: (402) 471-2244 • gov.heineman@gov.ne.gov

Application for Executive Appointment

APPOINTMENT DESIRED (Board/Commission Name) _____

NAME OF YOUR STATE SENATOR _____

Personal Information

NAME (please type or print last name, first name, and middle initial) _____

Mr. Ms. Miss Mrs.

Legal Residence Street City State Zip County

Business Address Street City State Zip County

Home Phone: () _____ Cell/Pager () _____ Work Phone: () _____

FAX Number: () _____ Email Address: _____

Date of Birth: _____ Place of Birth: _____ SSN (optional) _____

Occupation: _____ Name of Spouse: _____

Are you a United States Citizen: Yes No

Congressional District (1, 2, or 3): _____

Have you ever been arrested or charged with a criminal offense? Yes No

Did the arrest or charge result in a criminal conviction? Yes No

Please explain: _____

Some appointments require specified partisan membership; therefore, we ask that you indicate your political affiliation:

Republican Democrat Independent Other (specify): _____

To assist in the selection, you are asked to voluntarily provide information, which is necessary for statistical reporting purposes. Under State and Federal law, this information may not be used to discriminate against you.

Affirmative Action Information: Male Female Racial/Ethnic background: _____

Education

Schools attended including High School:

School Location Dates Major/Degree

School	Location	Dates	Major/Degree

PLEASE COMPLETE REVERSE SIDE

Employment

Statutes require some board appointees meet specific employment criteria. List employment beginning with the most recent experiences. A resume or additional information is optional.

Employer	Location	Dates

Additional Information

Please list additional supportive information about yourself, your experiences, and background, including any board or commission you have served on in the past, honors or awards you have received, and other volunteer activities.

AREAS OF INTEREST: Agriculture Cultural Economic Development Education
 Environment Finance Government Health Human Services Labor
 Nominating Commissions Legal/Law Enforcement Roads Transportation
 Other, please list _____

References

List names, addresses, and phone numbers of at least three people who may be contacted for references:

1. _____

2. _____

3. _____

If you have recently prepared a biography or resume, PLEASE ATTACH IT TO THIS FORM

Some executive appointments are subject to confirmation by the Nebraska Legislature. One area of inquiry will be whether you or your spouse have a conflict of interest. An investigation into your background may be conducted by the Nebraska State Patrol prior to your appointment.

I hereby grant the Governor's Office and the Nebraska State Patrol permission to obtain, and provide the Governor, any and all records pertaining to me from the Department of Revenue, Department of Motor Vehicles, Law Enforcement Agencies, credit bureaus, past and present employers, employees, business associates, affiliations, and acquaintances.

As a citizen of the United States and a resident of this state, I will accept appointment if selected by the Governor. If appointed, I pledge my best efforts to resolve, before assumption of office, any conflicts of interest that would be inconsistent with my responsibilities as a gubernatorial appointee.

Name (please print)

Signature

Date

**Return completed form to: Peggy King, Staff Assistant for Boards and Commissions,
Nebraska Governor's Office, State Capitol, Box 94848, Lincoln, NE 68509-4848
402/471-1971; FAX 402/471-6031**