



Sierra Vista MPO

401 Giulio Cesare Ave., Sierra Vista, Arizona 85635
520-439-2178 - fax 520-417-4859 - www.svmmpo.org

**APPLICATION TO:
BICYCLE & PEDESTRIAN ADVISORY COMMITTEE (BPAC)**

DATE: _____

NAME: _____ TELEPHONE: _____ / _____
(HOME / CELL) (WORK)

E-MAIL ADDRESS: _____

ADDRESS: _____ CITY: _____ ZIP: _____

MAILING ADDRESS: _____

EDUCATION: _____

OCCUPATION: _____
(IF RETIRED, INDICATE FORMER OCCUPATION)

PROFESSIONAL/COMMUNITY ACTIVITIES: _____

QUALIFICATIONS/INTEREST IN BICYCLE & PEDESTRIAN ADVISORY COMMITTEE:

PRIMARY INTEREST (CHECK ONE):

- ☐ BICYCLE
☐ PEDESTRIAN

REFERENCES: 1. _____
(NAME) (ADDRESS) (PHONE)

2. _____
(NAME) (ADDRESS) (PHONE)

AS A CANDIDATE FOR AN SVMPO BOARD APPOINTED SPECIAL COMMITTEE, YOUR NAME, ADDRESS AND PHONE NUMBER WILL BE AVAILABLE TO THE PRESS AND PUBLIC UPON REQUEST.

(APPLICANT'S SIGNATURE)

Please return completed application to the Sierra Vista Metropolitan Planning Organization