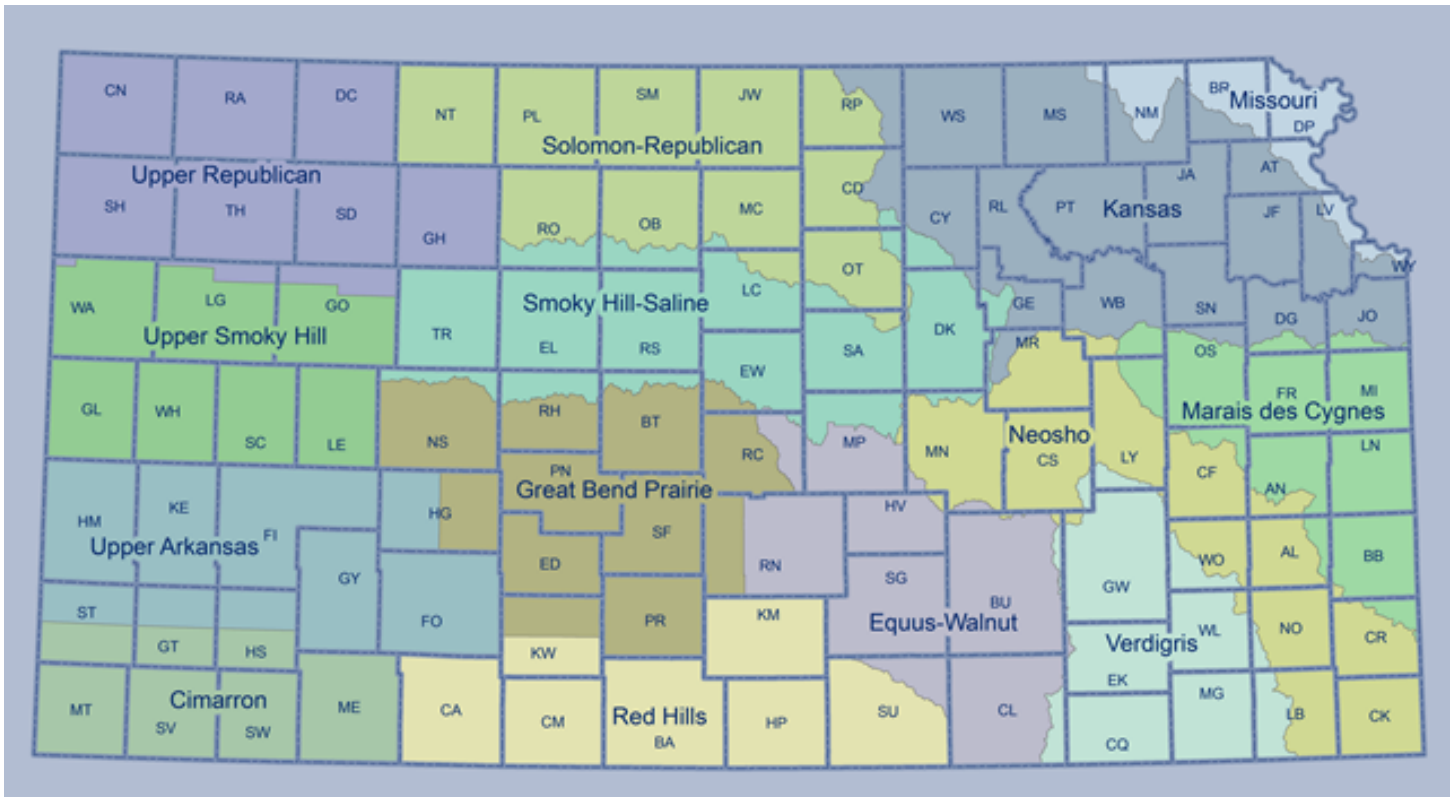


KANSAS WATER AUTHORITY/KANSAS WATER OFFICE APPLICATION FOR REGIONAL ADVISORY COMMITTEE MEMBERSHIP



KANSAS WATER AUTHORITY/KANSAS WATER OFFICE

Regional Advisory Committees provide advice to the Kansas Water Office and the Kansas Water Authority regarding the formulation and revision of the Kansas Water Plan, its implementation and other matters. Committees represent each of the 14 major regional areas in the state and are comprised of no less than 9 and no more than 13 members, as determined by the Kansas Water Authority. Members represent various water uses in the region. Applications received will be reviewed by the Kansas Water Authority Committee on Regional Advisory Committee Operations and they will make recommendations on membership to the full Kansas Water Authority for appointment.

*Regional Advisory Committee members are eligible only in the region in which they have their primary place of residence. At the discretion of the Kansas Water Authority, a member may serve on a regional committee in which they have their place of employment, provided the employment is closely connected to the water user category which they would represent. **Please note:** Regional Advisory Committee members serve without compensation and receive no reimbursement for expenses.*

Please select the region you reside in:

- | | | |
|---------------------------|--------------------------|---------------------------|
| <u>Cimarron</u> | <u>Equus-Walnut</u> | <u>Great Bend Prairie</u> |
| <u>Kansas</u> | <u>Marais des Cygnes</u> | <u>Missouri</u> |
| <u>Neosho</u> | <u>Red Hills</u> | <u>Smoky Hill-Saline</u> |
| <u>Solomon-Republican</u> | <u>Upper Arkansas</u> | <u>Upper Republican</u> |
| <u>Upper Smoky Hill</u> | <u>Verdigris</u> | |

Please return completed application to: Kansas Water Office, 900 SW Jackson Street, Suite 404, Topeka, KS 66612; fax the form to 785-296-0878 or email to kwo-info@kwo.ks.gov. Please call 1-888-526-9283 (toll free) if you have any questions.



PERSONAL INFORMATION

FIRST NAME

LAST NAME:

ADDRESS 1:

ADDRESS 2:

CITY:

STATE:

ZIP CODE:

HOME PHONE:

WORK PHONE:

CELL PHONE:

EMAIL ADDRESS:

EMPLOYER:

OCCUPATION:

Please indicate your general interest in serving on a Regional Advisory Committee.

Please check one or more of the Core Categories or provide another in the "Other" line.

Agriculture (CC)

At Large Public (CC)

Conservation/Environment (CC)

Industry/Commerce (CC)

Public Water Supply (municipal or other) (CC)

Other

Pertinent information may include, but not be limited to, education, training, job & occupational experience, volunteer activities & your future vision of the region's water resources.

Please attach additional sheets if necessary.

**Applicant
Signature:**

Date: