

ECAP

City of Tucson Employee Combined Appeal Program

2016 BOARD APPLICATION FORM

NAME:

CURRENT POSITION:

DEPARTMENT:

DIVISION:

PHONE NO.:

FAX NO.:

POSITIONS AVAILABLE:

Members-at-Large

SUPERVISOR'S APPROVAL: Your signature indicates your approval of the applicant's full participation as a member of the ECAP Board.

Supervisor's Signature: _____

COMMENTS:

If you have any questions, please contact Terry Lopez, ECAP Board President at 837-7804.

Please return completed, signed application to Diane Link, ECAP Board Secretary at Diane.Link@tucsonaz.gov or interoffice mail.

Once application is received, it will be reviewed by the current Board Members for acceptance. Applicants will be notified of their acceptance by letter from the ECAP Board.