



CITY OF FRIENDSWOOD

Applications must be submitted to the City Secretary's Office via email to: citysecretary@friendswood.com

FOR OFFICE USE ONLY	
Date Received:	_____
Date of Meeting:	_____
Date of Response:	_____

4TH OF JULY GRAND MARSHAL APPLICATION

Applicant Information

Applicant's Name: _____

Mailing Address: _____ Zip: _____

Home Phone: _____ Mobile: _____ Email: _____

Nominee's Information

Nominee's Name: _____

Mailing Address: _____ Zip: _____

Home Phone: _____ Mobile: _____ Email: _____

Basis of Application

Select the basis on which the Nominee qualifies:

- | | |
|---|---|
| <input type="checkbox"/> Civic and/or social services | <input type="checkbox"/> Humanitarianism |
| <input type="checkbox"/> Personal achievements in the areas of the arts, sports, etc. | <input type="checkbox"/> Distinction brought to Friendswood resulting from achievements elsewhere |

Has the Nominee been a Grand Marshal for the City's parade in the past? Yes No

Description of the Nominee's act(s) or which have displayed outstanding service, support, and commitment to the community, county, state, and/or country.

Applicant's Signature

I have read and understand the City of Friendswood's Grand Marshal Selection Policy and affirm that I have visited with the Nominee, who is willing to undergo a background check and to serve if selected by the City Council.

Applicant's Signature

(Date)

Additional sheets may be submitted for consideration.

References' Signatures

I have read the foregoing application and desire to support the nominee. I further affirm that I am a qualified voter of the City of Friendswood and have not signed as an applicant or a reference for another nominee for Grand Marshal this year. I am willing to provide additional information to the City upon request.

Reference's Signature: _____

Reference's Printed Name: _____

Reference's Mailing Address: _____ Zip: _____

Home Phone: _____ Mobile: _____ Email: _____

Reference's Signature: _____

Reference's Printed Name: _____

Reference's Mailing Address: _____ Zip: _____

Home Phone: _____ Mobile: _____ Email: _____

Reference's Signature: _____

Reference's Printed Name: _____

Reference's Mailing Address: _____ Zip: _____

Home Phone: _____ Mobile: _____ Email: _____