The Shade Tree Commission of the City of Saint Marys

11 Lafayette Street Saint Marys, PA 15857

(814) 781-1718 FAX (814) 834-1304

APPLICATION FOR MEMBERSHIP

Mission Statement

"The City of Saint Marys Shade Tree Commission is committed to the planting and maintenance of trees, as well as removal of failing trees in order to beautify the City of Saint Marys, making it appealing to the residents and visitors while ensuring Saint Marys remains green."

<u>Number of Commission Members:</u> There are five (5) appointed members of the City of Saint Marys Shade Tree Commission.

<u>Length of Term:</u> Each member serves for a three (3) year term. Terms are staggered so that no more than two (2) member's terms expire in any given year. Members may seek to be reappointed for subsequent terms.

Others Involved: The Shade Tree Commission may have a consultant and/or an advisor. This might be someone with exceptional knowledge or training related to trees and their care or someone with a keen interest in serving the community who does not live within the City limits. The most recent consultant is a native of Saint Marys who is a forester who works for DCNR in Emporium.

<u>Meeting Date and Time:</u> The Shade Tree Commission usually meets on the first Wednesday of each month at 5:30 PM in the Small Conference Room in the basement of City Hall. Meeting seldom last more than sixty (60) minutes.

Additional Time Commitment: The minimum time would be approximately two (2) hours per month plus time required to prepare for each meeting by reading the packet of information provided electronically one (1) week prior to each monthly meeting. There are several other times during the year when the Commission meets. This would be for the Arbor Day events in April-May and twice annual City Maintenance Tours. Minimum additional hours would be 10-15 per year unless the member holds an office which could require approximately 5-10 additional hours per month.

Please provide the information requested on the reverse side!

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Name of Applicant
Address:
Phone Number: Cell Number:
E-Mail Address:
1. Please describe your reason(s) for your interest in membership in the Shade Tree Commission.
2. Please describe any skills, experience, education and/or training that you possess that you feel would be valuable as a member of the Shade Tree Commission.
Other Comments: