TEXAS
Health and Human Services

Form 5003
March 2013-E

Registration and Request to Appear Before the Department of Aging and Disability Services Council

Thank you for your interest to appear before the Texas Department of Aging and Disability Services (DADS) Council. Complete the information below if you wish to provide public comment.

Public Comment Will Be Limited To Three Minutes.

Please Print Clearly

Date	Name	
Address		
City	State	Zip Code:
Email Address:	Telephone No:	
I wish to appear before the DADS Council. My comments/suggestions will: ☐ support ☐ oppose ☐ provide information on this subject.		
Give a brief explanation of the topic/agenda item you wish to address:		
I represent: ☐ myself ☐ other (i.e., agency, business, or organization) – _____		
I have received or expect to receive money, something of value or financial benefit in return for services rendered in making this appearance. ☐ Yes ☐ No		

I certify the statements made above are true and correct.

Signature _____ Date _____

Guidelines For Public Comment

1. A public comment opportunity is offered at each DADS Council meeting. Persons wishing to make public comment are asked to fill out and submit this form as early as possible at the meeting. Public comment forms may be submitted throughout the duration of the meeting.
2. The moderator will notify the persons registered for public comment of their scheduled time.
3. You will be limited to a three minute public comment period, which is not to last beyond the scheduled time period. Speakers will be taken on a first come, first served basis during the public comment period listed on the agenda.
4. Presentation handouts – Be prepared to provide 12 copies to share with the Council members and attach to this form.