

Return to:  
City Clerk's Office  
23 Russell Blvd.  
Davis, CA 95616

CITY OF DAVIS  
APPLICATION FOR APPOINTMENT

Received on:
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TO \_\_\_\_\_  
Board / Commission / Committee/Task Force

IF APPLYING FOR MULTIPLE COMMISSIONS PLEASE LIST IN ORDER OF PREFERENCE

**PERSONAL DATA SHEET**

Last Name _____	First _____	Middle _____	Home Phone _____	Business Phone: _____
Home Address _____			Email: _____	
Number / Street _____				
City/State/Zip _____			Are you at least 18 years old? _____	

**Background Information:**

Why do you wish to serve as a member of this board or commission? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What would you bring by way of perspective or experience to this board or commission? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list your previous and present governmental and civic experience. Indicate when, position and duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Business Title or Occupation: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street Address \_\_\_\_\_ City, State and Zip \_\_\_\_\_ Phone number \_\_\_\_\_

Education – List schools attended, date graduated and type of degree or certificate: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any other special training or experience that would benefit your service on this board or commission: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any interests or associations which might present a conflict of interest? If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are your most important qualifications for the board or commission that you are applying for? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Statement of philosophy relating to the responsibilities of this board or commission: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What do you believe to be the main responsibilities of this board or commission? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I am aware of the obligations and responsibilities of this commission and am willing and able to fulfill this commitment should I be appointed: \_\_\_\_\_

Please attach your resume or any additional information or statements which you feel would be helpful to the City Council in reviewing your qualifications.

**AUTHORIZATION AND RELEASE**

I understand that in connection with this application for appointment, the information contained herein will be made available to the general public upon request. I further understand that if appointed, I may be required to take the oath of office and may be subject to requirements for filing financial disclosure statements.

\_\_\_\_\_  
Please Sign Here

\_\_\_\_\_  
Date

**NOTE: This document is a public record and may be disclosed/released pursuant to the California Public Records Act.**

**FOR OFFICIAL USE ONLY**

Applications will be kept on file for two years. This application will expire on: \_\_\_\_\_

Date of appointment by the City Council: \_\_\_\_\_

Alternate or Regular Commission member  
(Circle one)

Length of term: \_\_\_\_\_

Is this is re-appointment? \_\_\_\_\_