



City of San Bernardino

BOARDS, COMMISSIONS, & CITIZEN ADVISORY COMMITTEES

Date Received, For
Official Use Only

BOARD(S), COMMISSION(S), AND/OR CITIZEN ADVISORY COMMITTEE(S) APPLYING FOR:

1. _____ 3. _____
2. _____ 4. _____

| | | |
|------------------|------------|---------------------------------|
| LAST NAME | FIRST NAME | M.I. |
| HOME ADDRESS | ZIP | PHONE (HOME) (MOBILE) |
| EMPLOYER | JOB TITLE | EMAIL ADDRESS |
| BUSINESS ADDRESS | ZIP | BUSINESS PHONE |
| DATE OF BIRTH | | |

| | | |
|--|--|---|
| Length of residence in the City of San Bernardino _____ Years _____ Months | Are you a registered voter of the City of San Bernardino? <input type="checkbox"/> Yes <input type="checkbox"/> No | Which ward do you reside in? <input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5 <input type="checkbox"/> 7 <input type="checkbox"/> 2 <input type="checkbox"/> 4 <input type="checkbox"/> 6 |
|--|--|---|

Why you want to serve on a city board or commission:

What do you consider to be three (3) major assets that would qualify you for selection to this board, commission, or citizen advisory committee:

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|----|
| 1. |
| 2. |
| 3. |

Experience or special knowledge pertaining to area(s) of interest:

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|--|
| |
|--|

Educational background:

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|--|
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|--|

Occupational experience:

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|--|
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|--|

Professional or technical organization memberships:

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|--|
| |
|--|

Civic or community experience, memberships, or previous public service appointments:

OPTIONAL

How would you classify yourself? (Optional)

- American Indian/Alaskan Native African American/Black Asian
 Hispanic/Latino Native Hawaiian/Pacific Islander White
 Two or more of the above categories

What is your gender? (Optional)

- Female Other/Prefer to self-describe _____
 Male

Are you a person with a disability? (Optional)

- Yes No

Applications are screened on the basis of information submitted and may be subject to a Livescan as part of the application process.

The information provided is factual to the best of my knowledge. I understand that I may be required to complete a Statement of Economic Interests Form as required by law, and that I will abide by all the codes, ordinances, and regulations of the City of San Bernardino and the State of California.

SIGNATURE

DATE

Return to: The City of San Bernardino Council Office

Electronically: Council@sbcity.org

By Mail: 290 North D Street, San Bernardino, CA 92401

In Person: 290 North D Street, 1st Floor – City Information Center, San Bernardino, CA 92401

*Attach a resume and/or additional information which you feel will assist the Mayor and City Council in their selection.