

CITY OF SAN JUAN BAUTISTA
APPLICATION FOR AD HOC COMMITTEE MEMBER

Name: _____

Address: _____

Email: _____ Phone: _____

Employer: _____ Cell Phone: _____

_____ Work Phone: _____

NOTE: The information you provide is done with the express understanding that it is public information and may be provided to the public when requested.

Education: _____

Community Service Experience including service on other boards, commissions, clubs, and organizations

Clubs or Organizations: _____

Municipal Experience: _____

Why do you wish to be on this committee and what contributions can you make to the committee? (Attach additional sheet if necessary.)

Date: _____ Signature: _____

Attach resume if desired.

When completed, please return to the City Clerk's Office at 311 Second Street.