



COMMISSION / COMMITTEE / BOARD APPLICATION

Applicant Information

Full Name: _____ Date: _____

Address: _____ City: _____

Telephone: _____ Email _____

Current Employment

Business: _____

Position: _____ Business Telephone: _____

Address: _____ City: _____

Are you a registered voter in the City of Wasco? Yes No

I) Board / Commission / Committee for which you are applying:

- | | | |
|--|---|---|
| <input type="checkbox"/> Planning Commission | <input type="checkbox"/> Kern Mosquito Abatement | <input type="checkbox"/> Service Awards Committee |
| <input type="checkbox"/> Citizens Advisory Board WSP | <input type="checkbox"/> Wasco Recreation and Parks | <input type="checkbox"/> Tax Oversight Committee |

II) Please describe your interest in serving on the Board / Commission / Committee:

III) Please describe your community participation and/ or experience (may attach resume, awards, certificates, and other pertinent information):

IV) Why do you want to serve in this capacity?

Personal References (list two)

1) Name: _____ Phone: _____

2) Name: _____ Phone: _____

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

Signature: _____ Date: _____