



Boards and Commissions Application

Thank you for your interest in serving on a City of Capitola Advisory Group. Please fill out the following form with your information. Appointments are made at a public City Council meeting.

Application For:

Application For:

- Art and Cultural Commission - Artist
- Art and Cultural Commission - Arts Professional
- Art and Cultural Commission - At Large
- Commission on the Environment
- Finance Advisory Committee - At Large
- Finance Advisory Committee - Business Representative
- Historical Museum Board
- Planning Commission
- Other:

Applicant Information

First Name *

Anthony

Last Name *

Guajardo

Email *

[REDACTED]

Current Address *

Street Address

[REDACTED]

Address Line 2

City

Capitola

Postal / Zip Code

95010

State / Province / Region

Ca

Country

USA

Telephone (Home)

[REDACTED]

Telephone (Mobile) *

[REDACTED]

Are you a Capitola resident? *

No

Residential Neighborhood:

Are you applying as a Youth Member to an Advisory Group? *

No

Youth Members are encouraged to participate with City Boards, Committees, and Commissions.

Qualifications

Occupation:

Business owner

Please describe your qualifications and interest in serving on this Board/Commission/Committee: *

As a local business owner, I would like to better understand the budgets of the city and how budgets are allocated amongst city departments to best serve the community.

Additional Attachments

Acknowledgement Required *

Please note that appointment to this position may require you to file a conflict of interest disclosure statement or complete additional trainings with the City Clerk. This information is a public record and these statements are available to the public on request.

Acknowledged

Signature *

All information contained in this page is public data and will be made available for public review upon request. Qualifications and interests of applicants will be provided to the City Council in a public forum and will be reviewed before appointments are made. Questions regarding this application and appointment process should be directed to the Capitola City Clerk.

A handwritten signature in black ink on a light gray rectangular background. The signature is stylized and appears to be the name of the applicant.



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- Historical Museum Board
- Planning Commission
- Other:

Applicant Information

First Name *

Matt

Last Name *

Arthur

Email *

[REDACTED]

Current Address *

Street Address

[REDACTED]

Address Line 2

City

Capitola

Postal / Zip Code

95010

State / Province / Region

CA

Country

USA

Telephone (Home)

[REDACTED]

Telephone (Mobile) *

[REDACTED]

Are you a Capitola resident? *

Yes

Residential Neighborhood:

Jewel Box

Are you applying as a Youth Member to an Advisory Group? *

No

Youth Members are encouraged to participate with City Boards, Committees, and Commissions.

Qualifications

Occupation:

Capitola Village Business Owner

Please describe your qualifications and interest in serving on this Board/Commission/Committee: *

BIA Board Member

Chief Advisory Committee

Capitola Village Business owner since 2004

Additional Attachments

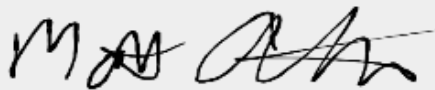
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A handwritten signature in black ink, appearing to read 'M. A. A.', is displayed on a light gray rectangular background.