

**City of Clearlake** 

14050 Olympic Drive, Clearlake, California 95422 (707) 994-8201 Fax (707) 995-2653

## Committee/Commission Member Application Please return the completed application to the City Clerk at the above address

Please be advised that the information on this form is a public record subject to disclosure upon request under the California Public Records Act.

Name:				
Telephone: (Home)	(Wor	·k)	(Cell)	
Email:				
Street Address:				
Mailing Address:				
Occupation:				
Employer:				
Registered Voter?	Yes	No		
Please provide a brief s appointed:			s you would bring to t	
Please provide a brief su	mmary of your ed	ucation and v	work experience:	

Name of City Commissions/Committees On Which You Have Served		No. of Years	Position(s) Held
	-		
	-		
	-		
Name of County Commissions/Committee On Which You Have Served	es	No. of Years	Position(s) Held
	-		
	-		
	-		
Can you attend daytime meetings (8:00 A	[]Yes []No		
Can you attend evening meetings (After 5	Yes [] No		

A résumé reflecting experience, community activities, or other qualifications not listed above may be attached in order to assist the Council in evaluating your application (OPTIONAL).

For further information contact Melissa Swanson, City Clerk at 994-8201 Ext. 106 or mswanson@clearlake.ca.us.

I HEREBY CERTIFY UNDER PENALTY OF DISQUALIFICATION AND TERMINATION THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Signature: \_

02/18/2025 Date:

## FOR OFFICE USE ONLY

Received

By: