

## **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.

lame:	William Morgan
elepho	one: (Home) (Work) (Cell) 707-321-6484
	napabill2001@me.com
reet /	14564 Palmer Ave., Clearlke, CA 95422
failine	SAME SAME
ccupa	School Bus Driver
mplo	Konocti Unified School District
	ered Voter?
ppoin have	provide a brief statement regarding what skills you would bring to the Committee sted:  lived in Clearlake for over twenty years and have a feeling for the community.  a background in business management and ownership, and understand budgets and planning.
As a Sch	nool Bus Driver I negotiate the streets in our community many times daily and see the areas needing improvement.
	provide a brief summary of your education and work experience:  ed from Arcadia High School and obtained an AA Degree at Pasadena City College before transferring to CalState Los ANgeles.
I have b	een a regional manager overseeing ten stores for a multinational company and owned my own auto parts company.
l have	managed winery production operations in Napa Valley at Charles Krug and at Schramsberg Vineyards.
I have	e been an elected member of the Howell Mountain School Board in Napa County.

lame of City Commissions/Committees On Which You Have Served	No. of Years	Position(s) Held
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Name of County Commissions/Committees On Which You Have Served	No. of Years	Position(s) Held
	Carried Annual Control of Control	
	wayanaa aada aa	
Can you attend daytime meetings (8:00 A.M	. – 5:00 P.M.)	Yes No
Can you attend evening meetings (After 5:00	D P.M.)	Yes ONo
A résumé reflecting experience, community may be attached in order to assist the Counc	y activities, or other cil in evaluating your	qualifications not listed above application (OPTIONAL).
For further information contact Melissa mswanson@clearlake.ca.us.	Swanson, City Cl	erk at 994-8201 Ext. 106
I HEREBY CERTIFY UNDER PENALTY OF I	DISQUALIFICATION A	AND TERMINATION THAT TO
	2/18/20	25
Signature:	Date:	
FOR OFFICE USE ONLY		
Received By:		