



# COMMISSION/COMMITTEE APPLICATION

Applying for: \_\_\_\_\_

**Special Requirements:**

*Youth Advisory Commission:* Must be a Lathrop resident between 13 to 18 years of age to serve on this commission.

*Senior Advisory Commission:* Must be a Lathrop resident 50 years of age or over to serve on this commission.

*Planning, Parks & Recreation Commissions, and Measure C Oversight Committee:* Must be a Lathrop resident to serve on this commission.

**PLEASE PRINT OR TYPE THE FOLLOWING INFORMATION:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone (home) \_\_\_\_\_ Telephone (work) \_\_\_\_\_

Telephone (cell) \_\_\_\_\_ Telephone (other) \_\_\_\_\_

Email: \_\_\_\_\_ Resident of the City of Lathrop: \_\_\_\_\_ years

Do you have Transportation to attend the Commission meetings and Functions? **Yes**  **No**

**Background Information:**

Are you related to a current City Employee? \_\_\_\_\_

If yes, give name and relationship \_\_\_\_\_

**Employment/Volunteer Information:**

\_\_\_\_\_  
*Organization* *Date*

\_\_\_\_\_  
*Location* *Position(s)*

Responsibilities/accomplishments: \_\_\_\_\_

\_\_\_\_\_  
*Organization* *Date*

\_\_\_\_\_  
*Location* *Position(s)*

Responsibilities/accomplishments: \_\_\_\_\_

\_\_\_\_\_

**Community Activities** that you have been involved with (feel free to attach additional pages)

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<i>Name of Organization</i>	<i>Position/Responsibilities</i>	<i>Dates</i>
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<i>Name of Organization</i>	<i>Position/Responsibilities/Accomplishments</i>	<i>Dates</i>
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**Special Awards or Recognitions you have received:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Educational Information:**

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<i>Educational Institution</i>	<i>Degree/Diploma/ Current Grade Level</i>	<i>Field</i>	<i>Year</i>
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<i>Educational Institution</i>	<i>Degree/Diploma</i>	<i>Field</i>	<i>Year</i>
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**Additional Information** (Please provide any other information which you feel would be useful to the City Council in reviewing your application.)

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\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

**Please sign and date your application and submit to the Office of the City Clerk at the address below.**

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Signature

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Date

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Parent/Guardian Signature (Required for Youth Advisory Candidates only)

**City Clerk  
City of Lathrop  
390 Towne Centre Drive  
Lathrop, CA 95330  
Email: website\_cco@ci.lathrop.ca.us**