

**APPLICATION FOR CITY OF LOMPOC
BOARDS, COMMISSIONS, OR COMMITTEES (Voluntary Service)**

ALL applicants must be City residents, except Library Board & Youth Commission. SEE City Clerk for details.

Return to City Clerk's Department, 100 Civic Center Plaza (P.O. Box 8001), Lompoc, CA 93438-8001

INSTRUCTIONS: Please type or print in ink this application in full including the title of the Board, Commission, or Committee (**limit one per application**) for which you desire consideration. Applications are maintained for one year. For more complete information or assistance, please contact the City Clerk's Department or view the AHandbook for Boards, Commissions, and Committees on the City's web site: www.ci.lompoc.ca.us

APPLYING FOR (Name of Board, Commission, or Committee): _____

NAME: _____ Last First Middle	ARE YOU 18 YEARS OF AGE OR OLDER? Yes____ No____ YOUTH COMMISSION: Youth representatives 15 to 21. Age:_____
ADDRESS: _____ Number Street City Zip	ARE YOU REGISTERED TO VOTE? Yes____ No____ If no, Explain: _____(optional).
TELEPHONE: Hm () _____ Wk () _____ E-MAIL ADDRESS: _____	Are you related to any City Employee or City Official? (See Attachment A for definition of relative), If yes, please explain and list the department in which they are employed: _____ City of Lompoc employees are not eligible for appointment.

CURRENT OCCUPATION AND EMPLOYER: _____

ADDITIONAL INFORMATION: Explain the reason(s) you desire to be appointed. Describe your relevant education, experience, training, volunteer activities, community organization membership, or personal interests that you think are relevant to this position. Continue on the reverse side if necessary. Please do not submit information on additional sheets of paper.

REFERENCES: List three persons, not relatives, who have knowledge of your character, experience, community involvement, and abilities (optional). **PLEASE OBTAIN PERMISSION FROM INDIVIDUALS BEFORE LISTING THEM AS A REFERENCE.**

Name	Address	Telephone Number	Occupation

AI have read Attachment A. To the best of my knowledge and foresight, I do not have and do not expect to have any interests or conflicts that would preclude me from participation in consideration and decisions on matters that come before this Board, Commission, or Committee. Exceptions are: (list conditions that might pose a conflict, i.e. property or business interests, job, affiliations, where decisions you make on the City body might affect your financial interest).” (**See Attachment A -Conflicts of Interest**). Appointed applicants must file a Statement of Economic Interest Form pursuant to Fair Political Practices regulations.

Signature of Applicant _____ Dated _____

(REMOVE Attachments A & B (Statement of Ethical Principles) and retain for your records).

FOR USE BY CITY CLERK'S DEPARTMENT:

(Date Stamp)

If applicable, date appointed: _____

Term Expires: _____

Date Statement of Economic Interest Form filed: _____