



CITY OF WEST COVINA

Application for Appointment to Commission

The City of West Covina welcomes your interest to serve on a City Commission. All commissioners must be residents of the City of West Covina and be at least 18 years of age. Each member of a commission shall be paid a stipend that is set by resolution of the City Council.

Commission to which appointment is sought:

- () Community and Senior Services Commission
- () Human Resources Commission
- () Planning Commission

PERSONAL INFORMATION *Please print the following information*

Name: _____

Address: _____

Years in West Covina: _____ Home phone: _____

E-mail address: _____ Cell phone: _____

Employer: _____ Work phone: _____

Occupation: _____

EDUCATION/TRAINING

High School		
	Name/Location	Highest grade completed
Colleges/Universities		
	Name/Location	Major
	Name/Location	Degree

1. Please list any certifications, professional licenses, personal experiences or interests, which you feel qualifies you to serve on a commission.

2. Please list any civic activities, clubs, associations, etc. that you are involved in. (current and past)

3. Briefly state why you are interested in serving on a City of West Covina Commission and how you can contribute to the City as a commissioner.

4. What do you see as the objectives and/or goals of city commissions and how would you help achieve these objectives/goals?

IMPORTANT

Appointees to city commissions may be required to complete a Statement of Economic Interests form as required by California Government Code §87200 et seq. and the City of West Covina Conflict of Interest Code. Statement of Economic Interests forms are considered a public record pursuant to The California Public Records Act (Government Code 6520 et seq.) and may be made available to any member of the public upon request.

The application process will be used to assist the City Council in their selection of appointments. The City Council is not bound by the submittal of an application to make an appointment. Applications will be kept on file in the City Clerk's Office for one year from the date of submittal.

Signature of Applicant: _____ Date: _____

RETURN COMPLETED APPLICATION TO:
Office of the City Clerk
1444 W. Garvey Avenue
West Covina, California 91790
626-939-8433