



## APPLICATION FOR APPOINTMENT TO BOARD OR COMMISSION

List the Board or Commission applying for: \_\_\_\_\_  
(print or type name of one Board or Commission)

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

Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Business Phone: ( ) \_\_\_\_\_

Years in Irwindale: \_\_\_\_\_ Registered Voter? \_\_\_\_\_

Educational background / degree: \_\_\_\_\_

Licenses or Special Certificates: \_\_\_\_\_

List any Irwindale, Los Angeles County, or other City committee, board or commission on which you presently serve or have served, and the year served. \_\_\_\_\_

\_\_\_\_\_

### **Please answer the following questions completely**

What are your reasons for wanting to serve on the Board or Commission? (Use additional paper, if necessary.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why do you feel that you would make a good Board Member or Commissioner? (Use additional paper, if necessary.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you applied for a City Board or Commission before? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, which one? \_\_\_\_\_

Application for Appointment  
To Board or Commission

Abilities, experiences, and interest which you believe would contribute to your participation in municipal government: \_\_\_\_\_

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

**PLEASE INCLUDE A RESUME, IF AVAILABLE**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ALL DATA SUPPLIED ON THIS APPLICATION IS CONSIDERED PUBLIC INFORMATION.**

**Return application to: Chief Deputy City Clerk  
City of Irwindale  
5050 N. Irwindale Avenue  
Irwindale, CA 91706**

**Please contact the Chief Deputy City Clerk at 626-430-2202 if you have any questions.**