

DATE RECEIVED:

City of Paso Robles
**APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/COMMISSION**

Name of Advisory Body: **YOUTH COMMISSION** **GRADE ENTERING INTO:**

Name of Applicant: _____

Street Address: _____ City: _____ Zip: _____

Mailing Address: _____
(if different from home)

Home Phone: _____ Cell Phone: _____ Email: _____

Employer *(if applicable)* _____

EDUCATION AND TRAINING

High School: _____ City: _____ State: _____

Other Schools/Training: _____ City: _____ State: _____

MEMBERSHIP IN ORGANIZATIONS: _____

OTHER ACTIVITIES/APPOINTMENTS

Current _____ From _____ To _____

Previous _____ From _____ To _____

Previous _____ From _____ To _____

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reasons you are applying to be appointed to this advisory body.

Date: _____
Signature _____

If appointed to a City committee, commission or other advisory body, I **DO NOT** authorize the City to post my contact information on its website or to release such information to a third party who may post the information on their website. The City may, however, disclose on the internet and in all other appropriate places that I serve on a City committee, commission or other advisory body.