



# CITY OF SAN JOSÉ, CALIFORNIA

## APPLICATION FOR BOARDS AND COMMISSIONS

MEMBERS OF SAN JOSÉ'S BOARDS AND COMMISSIONS MUST BE RESIDENTS OF SAN JOSÉ. PLEASE USE BLACK TYPE OR PRINT. Submit application to the Office of the City Clerk, 200 East Santa Clara Street, San José, California, 95113, Telephone (408) 535-1260. If more space is needed, please attach additional pages. Applications are valid for one year from the date of receipt and are public record.

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Board or Commission  
applying for:

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Are you a resident  
of San José?

Length of  
Residency

Council  
District No.

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Name  
(last, first, middle)

Home Phone No.  
Work Phone No.  
E-Mail Address

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Address

San José, CA Zip

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Present Employer (Name/Address)

Job Title/Description of Duties:

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Current Employer of Spouse (Name/Address)

Spouse's Job Title/Description of Duties:

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College, Professional, Vocational or  
Other Schools Attended

Major Subject

Dates Attended

Degree & Date

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List any position or office held in any governmental agency, civic or charitable organization including the dates:

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Languages spoken:



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Special Awards or Recognitions Received:

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Please state why you want to become a member of this Board or Commission including specific objectives which you would work toward as a member.

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**CONFLICT OF INTEREST:** State and local law require that you abstain from participation in decisions that may affect your financial interests, including sources of income, interests in real property or investments. In addition, if appointed, you may be required to fill out a disclosure statement which identifies certain of your financial interests beginning with the immediate twelve-month period prior to your appointment. Based on your best judgement, does this Board or Commission make decisions that may affect sources of income, interests in real property or investments of you or your spouse? If yes, please explain. Please identify any organizations, associations, corporations or entities by which you are employed or associated that might be affected by decisions of this Board or Commission, and the positions you hold.

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Please state any other information which you feel would be useful in reviewing your application.

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**SAN JOSÉ REFERENCES:**

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

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SIGNATURE OF APPLICANT \_\_\_\_\_

DATE SIGNED \_\_\_\_\_

**SOCIO-DEMOGRAPHIC INFORMATION: (OPTIONAL)**

Male  Female  18-35  36-45  46-55  56-65  65+

Disability: Yes  No  Any special needs during interview process? Yes  No

Racial/Ethnic Identification: \_\_\_\_\_

Sexual Orientation \_\_\_\_\_

How did you learn of this vacancy? \_\_\_\_\_