## **CITY OF ROCKLIN**



## APPLICATION FOR COUNCIL APPOINTMENT TO THE PARKS, RECREATION AND ARTS COMMISSION

## **YOUTH COMMISSIONER**

RETURN TO: FILING DATE:

City Clerk City of Rocklin 3970 Rocklin Road Rocklin, CA 95677 APRIL 7, 2017 4:00 P.M.

Thank you for your interest and willingness to serve your community. Please fill out the information listed below and return this application by the filing date indicated above.

APPLICANT INFORMATION						
Name (Last, First, Middle)						
Address				ZIP		
PHONE	Номе ( )		Cell ( )			
E-Mail Add						
PERSONAL INFORMATION						
Number of Years Rocklin Resident						
CURRENT SCHOOL ATTENDING						
GRADUATIO	n Year					
Do you have any relatives working for the City of Rocklin. If yes, state name(s) and relationship.  Yes  No						
PLEASE STATE THE REASONS YOU ARE INTERESTED IN SERVING ON THE PARKS, RECREATION AND ARTS COMMISSION.						

PERSONAL INFORMATION					
PLEASE DESCRIBE CURRENT SCHOOL AND COMMUNITY SERVICE ACTIVITIES:					
WHAT ADDITIONAL INFORMATION WOULD YOU LIKE US T AND ARTS COMMISSION?	O KNOW TO BETTER ASSESS YOUR SUITABILITY TO THE PARKS, RECREATION				
REFERENCES					
PROVIDE NAME AND CONTACT INFORMATION FOR TWO PE	EOPLE WHO CAN COMMENT ON YOUR QUALIFICATIONS. THESE INDIVIDUALS				
MAY BE TEACHERS, A COUNSELOR OR A COMMUNITY LEADE 1.	ER WITH WHOM YOU HAVE WORKED.				
2.					
APPLICANT SIGNATURE					
DATE:					
PRINT NAME:	SIGNATURE:				