



## CITY CLERK'S OFFICE

[Print Form](#)

# APPLICATION FOR APPOINTIVE POSITION

### **INSTRUCTIONS:**

Applications should be filled out completely so that the City Council may fully evaluate your qualifications. Return your completed application to [cityclerk@san-marcos.net](mailto:cityclerk@san-marcos.net) or CITY CLERK'S OFFICE, City of San Marcos, 1 Civic Center Drive, San Marcos, CA 92069-2918.

Eligibility requirements may vary depending on position. Please visit [www.san-marcos.net](http://www.san-marcos.net) for further qualification requirements, term length and commission information. Any person appointed to or selected for an appointive position will serve at the pleasure of the City Council.

The following personal information is for internal use only and will not be available to the public. The pages following the Applicant Information will be available for public inspection and will be posted on the City website as part of the nomination process.

### **APPLICANT INFORMATION**

|  |       |  |       |
|--|-------|--|-------|
| NAME                                   |       |  | DATE  |
|  |       |  |       |
| RESIDENCE ADDRESS                      |       |  | PHONE |
|  |       |  |       |
| CITY                                   | STATE | ZIP  | EMAIL |
|  |       |  |       |
| HOW LONG HAVE YOU LIVED IN SAN MARCOS? |       | REGISTERED TO VOTE IN SAN MARCOS?                        |       |
|  |       | YES <input type="checkbox"/> NO <input type="checkbox"/> |       |

| NAME OF COMMISSION/COMMITTEE/BOARD (IN ORDER OF PREFERENCE) | ELIGIBILITY REQUIREMENTS CONFIRMED<br>(City Clerk Use Only) |     |
|---|---|-----|
| 1   | NO  | YES |
| 2   | NO  | YES |
| 3   | NO  | YES |

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SIGNATURE

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DATE



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## CIVIC EXPERIENCE

LIST PRIOR OR CURRENT CIVIC EXPERIENCE (Include membership(s) in professional, charity or community organizations)

| NAME OF ORGANIZATION | DATES SERVED |          | OFFICE HELD (If any) |
|----------------------|--------------|----------|----------------------|
|                      | START DATE   | END DATE |                      |
|                      |              |          |                      |
|                      |              |          |                      |
|                      |              |          |                      |

## OCCUPATION/EDUCATION HISTORY

| ORGANIZATION/SCHOOL | DATES SERVED |          | TYPE OF BUSINESS/DEGREE |
|---------------------|--------------|----------|-------------------------|
|                     | START DATE   | END DATE |                         |
|                     |              |          |                         |
|                     |              |          |                         |
|                     |              |          |                         |
|                     |              |          |                         |

## OTHER RELEVANT EXPERIENCE/EXPERTISE

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## WHAT CITY PROGRAMS/PROJECTS WOULD YOU LIKE TO SEE IMPROVED OR IMPLEMENTED?

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## MOST INTERESTING ASPECT OF THIS COMMISSION TO YOU?

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