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# COMMISSION APPLICATION

Name \_\_\_\_\_

Torrance resident _____ years	Torrance registered voter: Y <input type="checkbox"/> N <input type="checkbox"/>	Commission Certification Training Date:
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<b>OFFICE USE ONLY</b>	Registered voter: <input type="checkbox"/>	Certification training: <input type="checkbox"/>
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Please indicate commission(s) preferred. Pick no more than three (indicate first, second, third choice).

**NOTE:** **APPOINTED** Commissioners are **REQUIRED** to complete a Statement of Economic Interest (Form 700).

Please be sure to schedule your own appointments with the Mayor and City Council (310) 618-2801.

- |  |  |                       |
|--|--|-----------------------|
| _____ Airport                            | _____ Cultural Arts                                  | _____ Planning        |
| _____ Cable Television<br>Advisory Board | _____ Environmental Quality<br>& Energy Conservation | _____ Social Services |
| _____ Civil Service                      | _____ Library  | _____ Traffic         |
| _____ Commission on Aging                | _____ Parks & Recreation                             | _____ Water           |

Are you now, or have you ever been, a City of Torrance commissioner? Yes  No

If yes, name of Commission: \_\_\_\_\_

### Community Service Experience

Organization	Served From	Served To	Office Held

### Education:

School	Major	Graduation Date & Degree

Additional pertinent courses or training:

Other skills, experience or interests:

Please furnish brief written response to the questions *using additional sheets as necessary*. If you are applying for more than one commission please answer for each commission as necessary

1. What is there specifically in your background, training, education and interests, which qualify you as a candidate?

2. What do you see as the objectives and goals of the commission?

3. How would you help achieve the objectives and goals? What special qualities can you bring to the commission?

**This information will remain confidential:**

Name \_\_\_\_\_  
*(If appointed, this is how your name will appear on your business cards, name badge, and nameplate)*

Residential address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Phone: Res \_\_\_\_\_ Bus \_\_\_\_\_ Cell \_\_\_\_\_

**Employment Information:**

Present occupation: \_\_\_\_\_

Name and address of employer: \_\_\_\_\_

Please provide the names, addresses, and telephone numbers of three personal references (other than family members):

Name	Address	Phone

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