



# BOARD OR COMMISSION APPLICATION FORM

DATE: \_\_\_\_\_

Check One: New Appointment   
Re-Appointment

NAME OF BOARD OR COMMISSION: \_\_\_\_\_

YOUR NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE (H) \_\_\_\_\_ WORK \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

HOW LONG HAVE YOU BEEN A RESIDENT OF THE CITY OF RICHMOND? \_\_\_\_\_

REASONS FOR INTEREST IN APPOINTMENT: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FRATERNAL AND/OR CIVIC ORGANIZATIONS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

EDUCATION: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## REFERENCES (Minimum 5—List Name, Address & Phone Number)

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_

**DELIVER OR MAIL TO:** CITY CLERK  
1401 MARINA WAY SOUTH  
P.O. BOX 4046  
RICHMOND, CA 94804  
(510) 620-6513

REV. 09/03

*For Office Use Only:* New Appointment:

Reappointment:  1st  2nd  3rd