

CITY OF SAN MARINO

BIOGRAPHICAL DATA FOR APPOINTMENT TO CITY ADVISORY BODIES AND COMMISSIONS

(Please Type or Print)

The information contained on this form is for the use of the City Council in order to fill vacancies on City Advisory Boards, Commissions, Committees, or Task Forces.

Biographical forms may be submitted at any time during the year.

Board, Commission, Committee, or Task Force to which appointment is desired:

Name: _____ Telephone: _____

Address: _____

Business: _____ Telephone: _____

Address: _____ Zip: _____

Length of Residency in San Marino: _____

Date available for appointment: _____

ANSWER THE FOLLOWING: (USE ADDITIONAL SHEETS IF NECESSARY)

Community Service

(List boards, commissions, committees and organizations currently serving or have served, offices held and in what city)

Employment

(Title and duties, current and past)

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Education

(Include professional or vocational licenses or certificates)

Personal

Rules of law and ethics prohibit members from participating in and voting on matters in which they may have a direct or indirect financial interest. Are you aware of any potential conflicts of interest which may develop from your occupation or financial holdings in relation to your responsibilities as a member of the advisory body or commission to which you seek appointment?

Yes____ No____

(If yes, please indicate any potential conflicts.)

Are you aware of the time commitment necessary to fulfill the obligations of the advisory body or commission to which you seek appointment? (If so, what is your understanding?)

Yes____ No____

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Furnish brief written responses to the four following questions:
(Use additional sheets if necessary.)

1. What is there in your background, training, education or interests which qualifies you as an appointee?
2. What do you see as the objectives and goals of the advisory body or commission to which you seek appointment?
3. How would you help achieve these objectives and goals? What special qualities can you bring to the advisory body or commission?
4. Why do you wish to serve the City of San Marino in this fashion?

I hereby certify that the following is correct to the best of my knowledge.

Signature

Date

You are invited to attach additional pages, enclose a copy of your resume, or submit supplemental information which you feel may assist the City Council in its evaluation of your application.

WHEN COMPLETED MAIL ORIGINAL TO:

City Clerk
City of San Marino
2200 Huntington Drive
San Marino, CA 91108