



KELLIE E. WEAVER
CITY CLERK

OFFICE OF THE CITY CLERK
kweaver@turlock.ca.us

156 S. BROADWAY, SUITE 230 | TURLOCK, CALIFORNIA 95380 | PHONE 209-668-5540 | FAX 209-668-5668 | TDD 1-800-735-2929

CITIZENS DESIRING TO SERVE THEIR CITY

Please indicate your preference:

_____ **Parks, Arts & Recreation
Commission**

_____ **Stanislaus County Local Task Force
on Solid Waste**

_____ **Planning Commission**

_____ **Turlock Mosquito Abatement District
Board of Trustees**

_____ **Other** _____

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Please provide the following information (use reverse side or additional paper, if needed)

Name: _____

Address: _____ Zip Code: _____

Telephone: Home: _____ Work: _____

Do you live within the City limits? _____ Are you registered to vote? _____

How long have you lived in Turlock? _____

Are you, or are you related to, a current City employee? _____ If yes, please indicate the person's name and relationship, if not yourself. _____

Occupation: _____

Business Address: _____ Zip Code: _____

Education (highest school year complete, degrees, etc.): _____

Employment Highlights: _____

Prior Public Service, if any: _____

Present and past community activities and organizations: _____

What are your most important qualifications for the commission(s) or committees(s) that you indicated above? _____

NOTE: APPLICATIONS WILL BE HELD FOR CONSIDERATION FOR A PERIOD OF ONE (1) YEAR FROM DATE OF RECEIPT.

You may submit additional or supplemental information along with this form.

Please return to:

Kellie Weaver, City Clerk
City of Turlock
156 S. Broadway, Suite 230
Turlock, CA 95380
(209) 668-5540, Ext. 1110

Signature

Date