



CITY OF COALINGA

155 WEST DURIAN ● COALINGA, CA. 93210
(559) 935-1533

APPLICATION FOR APPOINTMENT TO BOARDS, COMMISSIONS, COMMITTEES

| | | | |
|--|-------|----------------|----------|
| Name (print) | | | |
| Last | First | Middle | |
| Name of Board, Commission or Committee in which you are interested: | | | |
| Home Address: | | City and State | Zip Code |
| Current Employer: | | | |
| Business Address: | | | |
| Telephone: | Home | Office | |
| What experience or special knowledge do you have that would be of benefit to you in the position for which you are applying? | | | |
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| Signature: | | Date: | |