

City of Marysville 526 C Street, Marysville, CA 95901 Application for Appointment Boards, Committees and Commissions

Name:	Phone Number: ()
Reside	ce Address:
Desire	Appointment:
Educat	on and experience which you feel qualifies you for appointment to this position:
Why ar	you requesting this appointment?
Refere	ces; please provide 3 references, along with their contact information.
1)	Name:
1)	Contact:
	Type of reference (Business or Personal):
2)	Name:
	Contact:
	Type of reference (Business or Personal):
3)	Name:
	Contact:
	Type of reference (Business or Personal):

I understand that I may be interviewed for this position. If approved by the City Council, I will accept the appointment and serve as required.

I hereby certify that all statements made in this application are true and complete and that misstatement of material fact will subject me to disqualification.

All persons are encouraged to apply for positions for which they are qualified and will be given consideration without regard to race, religious creed, color, sex (including gender, gender identity, gender expression, transgender, pregnancy and breastfeeding), national origin, ancestry, disability (mental or physical), medical condition, genetic characteristics, or information, marital status, age (40 or over), sexual orientation (including homosexuality, bisexuality or heterosexuality), military or veteran status, or any other basis protected by law.

Signature of Applicant				Date
			For Personnel Use O	nly:
Date received:	/_	/	Staff Initials:	Is this Council Appointed: