



# City Of Sacramento

## Application for Appointment to the Sacramento City Youth Commission

**INSTRUCTIONS:** Provide **all** information requested; use black ink; any attachments must be single sided on 8.5 x 11 paper. **IMPORTANT:** Letters of recommendation are optional. If you choose to include a letter, it must be submitted as part of this application. Letters will not be accepted after your application is filed with the City Clerk's Office. For further information please call (916) 808-7200. **Note: All information provided on this form is public record.** Answer **all** questions and return completed application to: **Office of the City Clerk, Historic City Hall, 915 I Street – First Floor, Sacramento, CA 95814.**

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CATEGORY FOR WHICH YOU ARE APPLYING: \_\_\_\_\_

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Applicant Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

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Mailing Address (If different than home address):

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Telephone Number: \_\_\_\_\_  
(Home) (Alternate)

Email Address: \_\_\_\_\_

City Council District in which you reside: \_\_\_\_\_

City Council District in which you attend school: \_\_\_\_\_

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Name and Address of school you attend: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you, or an immediate family member, have any relationship (professional, financial, other) that may represent a potential conflict of interest for this advisory group? (Please Circle)                      Yes                      No

If yes, please explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City Code Chapter 2.40, Section: Article II. Attendance, states board/commission members are required to attend meetings on a regular basis. If appointed, will you be able to attend meetings regularly and devote the time necessary to fulfill your duties as a member? (Please Circle)                      Yes                      No

**Background Information:** You may also attach a resume reflecting experience, community activities or other qualifications not listed below that would be helpful to the Council in evaluating your application.

Have you ever served on an advisory group before? (Please Circle)                      Yes                      No

If yes, please explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**Please state the reason you would like to be a member of this commission:**

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**What do you feel are the issues most greatly affecting youth in your area?**

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**What youth related improvements do you recommend?**

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**I DECLARE, UNDER PENALTY OF PERJURY, THAT ALL STATEMENTS IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEGDE:**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please identify any specialized accommodations you will need for equal participation:**

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The following information is voluntary and is gathered in accordance with State and Federal laws for the purpose of evaluating the effectiveness of our Affirmative Action and recruitment efforts.

Please circle:                      Male / Female

Mark the applicable box:

- American Indian or Alaskan Native Persons having origins in any of the original peoples of North America and South America (including Central America) and who maintain tribal affiliation or community attachment.
- Asian Persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent (this includes Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam).
- Black Persons having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander Persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Hispanic or Latino Persons of Cuban, Mexican, Puerto Rican, South or Central America, or other Spanish culture or origin regardless of race. This does not include persons who acquire a Spanish surname.
- White Persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Two or More races All persons who identify with more than one of the above six races.
- Other
- Decline to answer