City of Pico Rivera Statement of Qualifications

For Service on Advisory Boards

I am interested in serving on the:

☐ **Planning Commission** ☐ **Parks & Recreation Commission** ☐ **Sister City Commission**

1. **Name** .....
   First *Middle* *Last*

   Residence Address .....
   Number and Street *Apt.#*

   .....
   City *State/Zip Code*

2. **How Long at Present Residence?** .....

3. **Telephone: Home** ( ) ..... **Business** ( ) ..... **E-Mail** .....

4. **Business Address** .....
   Number and Street *Apt.#*

   .....
   City *State/Zip Code*

5. **Education (Highest grade attained; degree, if any; school attended):** .....

   .....

6. **Job Experience (Beginning with present or last positions):**

Firm	Title	Employment Date

7. **Past & Present Community Service:** .....

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8. **Local residents who are qualified to comment on my capabilities (including at least two individuals who are not connected officially with the City of Pico Rivera):**

Name	Address	Telephone No.

9. **Additional Comments:** .....

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10. **Signature** ..... **Date:** .....

Attach additional information as needed. Return to:
Office of the City Clerk, P.O. Box 1016, 6615 Passons Blvd., Pico Rivera, CA 90660

Applications will remain on file for a period of 12 months from date of submission. Applicants wishing to be considered beyond the expiration date should file a new application.