



# CITY OF ROCKLIN

## APPLICATION FOR COUNCIL APPOINTMENT TO THE PARKS, RECREATION AND ARTS COMMISSION

### YOUTH COMMISSIONER

**RETURN TO:**

City Clerk  
City of Rocklin  
3970 Rocklin Road  
Rocklin, CA 95677

**FILING DATE:**

May 4, 2018  
4:00 P.M.

Thank you for your interest and willingness to serve your community. Please fill out the information listed below and return this application by the filing date indicated above.

APPLICANT INFORMATION			
NAME (LAST, FIRST, MIDDLE)			
ADDRESS			ZIP
PHONE	HOME ( )	CELL ( )	
E-MAIL ADDRESS			
PERSONAL INFORMATION			
NUMBER OF YEARS ROCKLIN RESIDENT			
CURRENT SCHOOL ATTENDING			
GRADUATION YEAR			
DO YOU HAVE ANY RELATIVES WORKING FOR THE CITY OF ROCKLIN. IF YES, STATE NAME(S) AND RELATIONSHIP. _____			Yes <input type="checkbox"/>
			No <input type="checkbox"/>
PLEASE STATE THE REASONS YOU ARE INTERESTED IN SERVING ON THE PARKS, RECREATION AND ARTS COMMISSION. _____			
_____			
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**PERSONAL INFORMATION**

PLEASE DESCRIBE CURRENT SCHOOL AND COMMUNITY SERVICE ACTIVITIES: \_\_\_\_\_  
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WHAT ADDITIONAL INFORMATION WOULD YOU LIKE US TO KNOW TO BETTER ASSESS YOUR SUITABILITY TO THE PARKS, RECREATION AND ARTS COMMISSION? \_\_\_\_\_  
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**REFERENCES**

PROVIDE NAME AND CONTACT INFORMATION FOR TWO PEOPLE WHO CAN COMMENT ON YOUR QUALIFICATIONS. THESE INDIVIDUALS MAY BE TEACHERS, A COUNSELOR OR A COMMUNITY LEADER WITH WHOM YOU HAVE WORKED.

1. \_\_\_\_\_  
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2. \_\_\_\_\_  
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**APPLICANT SIGNATURE**

DATE:

PRINT NAME:

SIGNATURE: