

Briefly state why you wish to serve on the City of Sanger Citizen's Oversight Committee:

If you wish, you may list references in the space provided below:

EMPLOYMENT INFORMATION:

Present Occupation: _____

Name of Firm: _____

Address: _____

PLEASE NOTE THAT THIS APPLICATION BECOMES PUBLIC INFORMATION

I hereby certify that the information contained in this application and any accompanying documents is true and correct to the best of my knowledge.

Signature of Applicant

Date

You are invited to attach additional pages, enclose a copy of your resume or submit supplemental information which you feel may assist the City Council in its evaluation of your application.

When completed mail/submit original to:

*Office of the City Clerk
City of Sanger
1700 7th Street
Sanger, CA 93657*