Please Return To:
Office of the City Clerk
2720 Second Street
Ceres, CA 95307-3292
(209) 538-5755
FAX (209) 538-5650

CITIZEN APPLICATION FOR APPOINTMENT TO THE CENTENNIAL COMMITEEE

Name _____ Phone (_____) _____

Home Address _____

City_____ Zip Code_____

Length of residence:
at above address_____ in Ceres_____

Occupation_____ Business _____

Business Address_____

City_____ Zip Code_____

Phone (_____) _____ E-Mail: _____

Employment Highlights:

_____

_____

_____

_____

_____

Education: (highest school year, degrees, etc.)

_____

_____

_____

(over)

Present and past community and/or public service:

_____

_____

_____

_____

What do you feel are your most important qualifications for appointment to this committee?

_____

_____

_____

_____

Other information pertaining to your appointment:

_____

_____

_____

_____

Please list below three (3) references with telephone numbers:

1._____

2._____

3._____

_____ _____

Date Signature

A resume about yourself is welcome by the City Council Members in evaluating your application.