

**Mayor**  
Lois Wynne  
**Mayor Pro Tem**  
Jeff Chedester  
**Council Members**  
Ray Madrigal  
Eddie Neal  
William Siegel



**Office of the  
City Manager**

119 Fox Street  
Lemoore, CA 93245  
Phone (559) 924-6700  
Fax (559) 924-9003

# APPLICATION FOR PUBLIC SERVICE APPOINTMENT

TO A MUNICIPAL BOARD /COMMISSION/COMMITTEE/ADVISORY TASK FORCE

Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone# \_\_\_\_\_

E-mail address \_\_\_\_\_ Cell # \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

Position Held \_\_\_\_\_ Business Phone # \_\_\_\_\_

How long have you resided in Lemoore \_\_\_\_\_ Are you a registered voter \_\_\_\_\_

Would you be available for meetings in the daytime \_\_\_\_\_ evenings \_\_\_\_\_ both \_\_\_\_\_

Please indicate the Commission or Advisory Committee for which you wish to apply:

- City Council     Planning Commission     Parks & Recreation Commission  
 Downtown Merchants Advisory Committee

What are your principle areas of interest in our City government \_\_\_\_\_

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List education, training or special knowledge which might be relevant to this appointment \_\_\_\_\_

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**Public Service Appointment Application**  
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List employment, membership in service or community organizations or volunteer work which might be relevant to this appointment

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Have you been, or are you now a member of a governmental board, commission or committee? If so, please provide name and dates service.

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REMARKS: Please indicate any further information that will be of value regarding your appointment.

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Name \_\_\_\_\_  
(Please print)

Date \_\_\_\_\_

Signature \_\_\_\_\_