

711 W. Cinnamon Drive • Lemoore, California 93245 • (559) 924-6700 Office of the City Manager

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		e evenings	both
Please indicate the Co	ommission or Advisory Comr	nittee for which you wish to apply	r:
☐ City Council	☐ Planning Commission	☐ Parks & Recreation Commis	sion
☐ Downtown Me	erchants Advisory Committe	e	
What are your principle	e areas of interest in our City	y government	

List education, training or special knowledge which migl	ht be relevant to this appointment
List employment, membership in service or community relevant to this appointment	organizations or volunteer work which might be
Have you been, or are you now a member of a government please provide name and dates service.	mental board, commission or committee? If so,
REMARKS: Please indicate any further information that	at will be of value regarding your appointment.
Name(Please print)	Date
(Please print)	
Signature	
Signature	_