



Application for Appointed Board or Commission

Placer County Board of Supervisors

I understand, by submitting this application, that the information provided may be publicly available

Name: _____ Home: Address: _____

City: _____ Zip Code: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____ Email Address: _____

Board or Commission for which you are applying: _____

Position for which you are applying: _____

Supervisorial District of your primary residence: ____ How long have you lived in Placer County? _____

List any relatives working for Placer County Government: _____

Are you presently serving on any other Placer County Board/Commission? Yes / No
If so, please name: _____

Do you have any relatives on the same board or commission for which you are applying? Yes /No

List any conflicts you may have with serving on this board: _____

Occupation (If retired, indicate former occupation): _____

Employer: _____

Employer Address: _____

Education: _____

Professional/personal civic, philanthropic, community affiliations and interests: _____

Additional references or information that you deem helpful to your application: _____

Why are you interested in serving on this board/commission/committee? _____

What background do you have that could benefit serving in this position? _____

Public Phone and/or Email (if appointed, we provide this information upon request) _____

Signature

Date

Resume or CV is requested, if available