Application to Boards, Commissions, and Committees

Directions: Please answer each question that applies to you as completely as possible.

Return completed application to: Clerk of the Board of Supervisors

333 W. Santa Ana Blvd Ste. 465

Santa Ana, CA 92701

Name: } Ms. } Mrs. } Mr			
First Name	Middle Initial	Last Name	
Residence Address:		P	
Street Address	City	State	Zip
Home Phone Number: ()			
	Area Code	Number	
How long have you lived at this residence?	Year(s)	Month(s)	
Occupation/Title:			
Business Address:			
Business Phone Number: ()	-		
Area Code	Number		
Email Address:			
. Are you a citizen of the United States? \ Yes \ N	o. Name the Country of c	itizenship:	
Are you a registered voter?* Yes No If yes	, name County you are regi	stered in:	
. Name the supervisorial district you live in.*	First } Second } Thin	d } Fourth	} Fifth
. Employment History: Attach resume to this app	lication.		
. Educational History: Should be included in re	esume		
. List all current professional or community organ	ization and societies of wh	ich you area a me	mber
Organization/Society	From (m	o./yr.) <u>To</u>	(mo./yr.)
1.			
	No.		
2.			

^{*}If necessary, call the Clerk of the Board's Office at 714-834-2206 for this information.