

COMMITTEE/	

Application for Appointment By City Council/Board of Directors

Return completed application forms to: Communications/City Clerk Department 610 Foster City Boulevard Foster City, CA 94404 (650) 286-3250 clerk@fostercity.org

DEADLINE FOR FILING:December 22,2022

For more information, visit www.fostercity.org

Please type or print in **BLACK INK ONLY**

Date:	_ Committee or Commission for Which Application is Filed: Audit Committee			
Name:	E-mail Address:			
Present Street Address:				
Cell Phone:	Home Phone:	How long have you lived in Foster City?		
What is your occupation?				
Employer's Name:				
Employer's Address:				
Your Present Position:		Length of Employment:		
Self Employed:				
Name and Description of Bus	iness:			
Address:		_ Phone:		
Length of Ownership:				
Have you ever served on a p	ublic board, committee or commission	?		
If ves, please explain:				

Do you have any relatives presently employed by the city or serving in any official capacity?

If yes, please give names(s) and relationship:

Please list names of any community organizations or activities to which you belong or in which you have participated, including dates of participation and offices held, if any:

Please list individuals who are well acquainted with your personal and/or professional qualifications

Name	Address	Occupation	Phone
Name	Address	Occupation	Phone
Name	Address	Occupation	Phone

Please state reasons and objectives for desiring to become a member of this committee/commission:

Please note, no attachments to this form will be accepted.