



## CITY OF MARTINEZ CITIZEN INTEREST FORM

For City Use Only	
Date Interviewed	____/____/____
Letter/FPPC	____/____/____
Commission	_____
Appointed	_____
Reso Number	_____

Date: \_\_\_\_\_

PERSONAL DATA			
NAME		HOME PHONE	CELL PHONE
RESIDENCE ADDRESS (STREET, CITY)		E-MAIL ADDRESS	
RESIDENT OF CONTRA COSTA COUNTY SINCE:	_____	RESIDENT OF THE CITY OF MARTINEZ SINCE:	_____
BUSINESS NAME (IF ANY)	BUSINESS ADDRESS	BUSINESS PHONE	
EDUCATION	DEGREE _____		
	VOCATIONAL / TRAINING _____		
	OTHER _____		

EMPLOYMENT		
PRESENT EMPLOYER (OR LAST)	POSITION / OCCUPATION	LENGTH OF EMPLOYMENT
IF YOU ARE CURRENTLY SERVING ON A COMMISSION OR HAVE PREVIOUSLY SERVED ON A PUBLIC BODY, PLEASE INDICATE THE AGENCY:		
QUALIFICATIONS FOR APPOINTMENT OR REASONS FOR APPLICATION		

IN ORDER OF PREFERENCE, CHOOSE WHICH COMMISSION/COMMITTEE YOU WOULD LIKE TO SERVE	
_____ Cemetery Commission	_____ Veterans Commission
_____ Civil Service Commission	_____ Planning Commission
_____ Design Review Committee	_____ Parks, Recreation, Marina & Cultural Commission (PRMCC)
_____ Oversight Committee	_____ Other _____

REFERENCES		
<i>Provide at least two individuals who are local residents qualified to comment and that are not connected officially with the City of Martinez</i>		
NAME	ADDRESS	PHONE
NAME	ADDRESS	PHONE
NAME	ADDRESS	PHONE

Type Name to Sign Form

If printing, mail or fax completed forms to:

CITY CLERK - City of Martinez  
525 Henrietta Street, Martinez, CA 94553  
Fax: (925) 229-5012