



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)
_____ Bond Oversight Committee	_____ Other _____

REFERENCES		
Provide at least two individuals who are local residents qualified to comment and that are not connected officially with the City of Martinez		
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