



COUNCIL ADVISORY GROUP ARTS AND CULTURE COMMISSION APPLICATION

Qualifications: Each Arts and Culture Commissioner shall be, and remain at all times during his or her incumbency, a resident of the City, or the owner, operator or manager of a business enterprise licensed to operate in the City, or an art educational professional currently teaching in the City.

All Arts and Culture Commissioners shall have specialized expertise in the fields of arts and culture, visual arts, design, urban planning, or cultural tourism.

Commission meets the second Tuesday of each month at 5:30 p.m.

Deliver or Send Completed Form to:
City Clerk's Office, 501 Poli Street, Room 204
Ventura, CA, 93001

Or email to: cityclerk@cityofventura.ca.gov BY RECRUITMENT DEADLINE

APPLICANT'S PERSONAL INFORMATION

APPLICANT'S NAME:

APPLICANT'S RESIDENCE ADDRESS-Street, City, Zip:

APPLICANT'S MAILING ADDRESS (IF DIFFERENT):

PHONE NUMBERS - HOME

BUSINESS

CELL

EMAIL ADDRESS:

APPLICANT'S OCCUPATION/WORK HISTORY

CHECK ALL APPLICABLE: RETIRED EMPLOYED UNEMPLOYED MILITARY OTHER

EMPLOYER/CITY, STATE	JOB TITLE	DUTY SUMMARY (LIST DUTIES THAT APPLY TOWARDS THIS COMMITTEE)

Arts and Culture Commission has specific membership requirements: Please check all that apply (NOTE: recruitments may only need individuals with specific requirements.):

- 1. I am an architect
 - landscape architect
 - urban planner
 - similar professional Name of profession _____

License No. _____

- 2. I am a visual artist. Yes No

- 3. Are you a Staff or Board Member of an organization that competes in the City Cultural Funding Grant Program? Yes No

Name of Organization _____

- 4. I am aware that members of the Arts and Culture Commission are ineligible to compete in the Cultural Funding Grant Program as an individual artist? Yes No

- 1. Describe what education, experience, training, license or professional registration, and public service qualifies you to serve on the advisory group you have selected: **(RESUME MUST BE ATTACHED)**

2. Describe other experience working in a group, receiving information, and arriving at consensus decisions.

3. I want to be appointed because:

4. Have you ever been convicted of a felony or a misdemeanor that resulted in jail or probation?
 Yes No Please do not list convictions pursuant to Health & Safety Code Sections 11357(b) or (c), 11360 (b) or (c), 11364, 11365, or 11550 as related to marijuana offenses. If yes, give the following information for each offense: Date, Charge, Place, Court, and Action Taken. You may omit any offense committed before your 18th birthday that was finally adjudicated in a juvenile court or under a Youth Offender Law. A conviction will not necessarily disqualify you from appointment.

5. Please list references (Names, address, and phone number). Elected City of Ventura Officials should not be listed as a reference.

Name	Address	Phone Number

By checking this box I hereby certify:

- That all information in this application is complete, truthful, and accurate to the best of my knowledge.
- I must be a City resident at all times during my appointment or an owner, operator or manager of a business enterprise licensed to operate in the City, or an art educational professional currently teaching in the City.
- If appointed, I understand it is my responsibility to notify the City of changes that would affect my membership on the committee.
- I recognize that Board/Commission/Committee membership requires my attendance at meetings and/or events. I am willing and able to make this commitment of time and effort to serve.
- I understand that the Public Records Act (PRA) allows for public review of this application.
- If appointed, I understand that I WILL be required to file a Conflict of Interest Statement (Form 700) pursuant to Fair Political Practices Commission regulations and complete Ethics Training and failure to do so in a timely manner may be cause for termination of my position.
- If appointed, I acknowledge I will not be eligible to compete in the Culture Funding Grant Program as an individual artist.

_____ Date

_____ Signature

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FOR OFFICE USE ONLY

Application Received _____

ARC Interview Date _____

City Council Approval Date _____

Term of Office _____