



COUNCIL ADVISORY GROUP WATER COMMISSION – **NON-PROFESSIONAL** APPLICATION

Water Commission reviews and makes advisory recommendations regarding water rates, water resources infrastructure projects in the five-year capital improvement program, the integrated water resources management plan, water supply options, the Urban Water Management Plan approval process, a water dedication and in-lieu fee requirement, and other water resource issues.

Member shall be persons with demonstrated special interest, competence, experience in, or knowledge of, the fields of hydrogeology, water and wastewater infrastructure, water resources, or water efficiency. Members shall not be required to be residents of the City, but shall reside within Ventura Water’s service area.

Commission meets the fourth 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)

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

1. I am employed, have been employed, or possess education to qualify for the following positions: Hydrogeologist <input type="checkbox"/> Civil Engineer with experience in water and wastewater infrastructure <input type="checkbox"/> Water Resources Manager <input type="checkbox"/> Water efficiency professional <input type="checkbox"/>
2. I have demonstrated a special interest, competence, experience in, or knowledge of, the fields of hydrogeology, water and wastewater infrastructure, water resources or water efficiency. Yes <input type="checkbox"/> No <input type="checkbox"/>

Have you or any of your relatives been employed or are presently employed by the City of Ventura?
Yes No

Have you or any of your relatives served or are presently serving on an advisory group of the City of Ventura? 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.)**

LICENSE NO. _____

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.
- 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.

Date

Signature

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FOR OFFICE USE ONLY

Application Received _____

ARC Interview Date _____

City Council Approval Date _____

Term of Office _____