



## COUNCIL ADVISORY GROUP DOWNTOWN PARKING ADVISORY COMMITTEE APPLICATION

APPLICANT'S PERSONAL INFORMATION
APPLICANT'S NAME:
APPLICANT'S RESIDENCE ADDRESS-Street, City, Zip:

<b>Deliver or Send Completed Form to:</b> City Clerk's Office, 501 Poli Street, Room 204 Ventura, CA, 93001 Or email to: <a href="mailto:cityclerk@cityofventura.ca.gov">cityclerk@cityofventura.ca.gov</a> BY RECRUITMENT DEADLINE		
APPLICANT'S MAILING ADDRESS (IF DIFFERENT):		
PHONE NUMBERS – HOME	BUSINESS	CELL
EMAIL ADDRESS:		

APPLICANT'S OCCUPATION/WORK HISTORY		
CHECK ALL APPLICABLE: <input type="checkbox"/> RETIRED <input type="checkbox"/> EMPLOYED <input type="checkbox"/> UNEMPLOYED <input type="checkbox"/> MILITARY <input type="checkbox"/> OTHER		
EMPLOYER/CITY, STATE	JOB TITLE	DUTY SUMMARY (LIST DUTIES THAT APPLY TOWARDS THIS COMMITTEE)

**Downtown Parking Advisory Committee has specific membership requirements: Please check all that apply (NOTE: Recruitments may only need individuals with specific requirements.):**

1. My principal address is within the Downtown Parking District Area - Yes  No
2. I am a business owner, operator or manager for a business within the Downtown Parking District Area - Yes  No
3. I own commercial property within the Downtown Parking District Area - Yes  No
4. City Resident only - Yes  No

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

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

- I want to be appointed because:

- 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 18<sup>th</sup> birthday that was finally adjudicated in a juvenile court or under a Youth Offender Law. A conviction will not necessarily disqualify you from appointment.

- 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

**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](mailto:cityclerk@cityofventura.ca.gov) **BY RECRUITMENT DEADLINE**

**FOR OFFICE USE ONLY**

Application Received \_\_\_\_\_