APPLICATION FOR APPOINTMENT TO THE CITY OF LAKEPORT ADVISORY BOARD, COMMISSION, OR COMMITTEE



Committee or Commission applying for (Please check one):

Lakeport Economic Development Advisory Committee (LEDAC) ☐ Parks & Recreation Commission ☐ Lake County Vector Control District Board ☐ Traffic Safety Advisory Committee ☐ Planning Commission ☐

APPLICANT NAME:			
ADDRESS:			
HOME PHONE:	WORK PI	HONE:	
EMAIL ADDRESS:			
Please include a brief statement as to why you would like to serve, what special qualifications or experience you may have for the position and/or any other information you would like to include as part of your application:			
(Continu	e on reverse side if necessary, or at	tach additional information)	
Signature:	,,	Date:	
Please return form to: City Clerk City of Lakeport 225 Park Street Lakeport, CA 95453 FOR CITY USE ONLY - APPLICANT, PLEASE DO NOT COMPLETE THIS SECTION			
Appointment: Approved	Length of Term:	Date:	
☐ Denied	From to		