

APPLICATION FOR APPOINTMENT TO
BOARD OF SUPERVISORS-APPOINTED SPECIAL DISTRICT POSITIONS

Name of Special District as listed on announcement: _____

Filing Period (as listed on the announcement): _____

Type of Member: _____ Incumbent? Yes _____ No _____

Name: _____

Last

First

Resident Address: _____

(Must be a resident of Nevada County)

Zip Code

Mailing Address: _____

Zip Code

Supervisorial District in which you reside: _____

(This information is available from the Election Office at 265-1298).

Email address

Phone Number: *HOME: _____ WORK: _____

*(Indicate if unlisted number)

Time(s) available to attend meetings (days, evenings, etc.) _____

EXPERIENCE: A resume may be attached containing this and any other information that would be helpful to the Board in evaluating your application.

Education/Employment Experience: _____

Community Experience and Affiliations: _____

Other County Boards/Commissions/Committees on which you have served: _____

Other experience you feel would be helpful to the Board of Supervisors in making this appointment: _____

REFERENCES: Please list two references with telephone numbers: _____

Applicants may be required by State Law and County Ordinance to file a financial disclosure statement as part of the appointment process. The form can be viewed at <http://www.fppc.ca.gov> or the Clerk of the Board of Supervisors office. An Oath of Office will be required upon appointment.

I have reviewed the Financial Disclosure Statement requirement: _____

Initial

Date: _____ **Signature:** _____

Applications must be filed with the Clerk of the Board of Supervisors, County of Nevada, 950 Maidu Avenue, Suite 200, PO Box 599002, Nevada City, CA 95959-7902. This application is a public document.