



CITY OF FONTANA
CITY COMMISSION APPLICATION

DIRECTIONS: An application/resume is required for consideration for each appointive position of a City Commission to which you are applying for. This should be filled out completely and submitted to the City Clerk's Office. Additional sheets may be attached if necessary. All applications/resumes will be forwarded to the Mayor and City Council for evaluation and appointment. Applications will be kept on file for two years in the City Clerk's Office.

Please type or print in black ink only.

Date: _____

Commission Applying For: _____

Name: _____

Home Address: _____

Home Phone Number: _____

E-mail Address: _____

Do you live within the Fontana City limits? If so, for how long? _____

Are you 18 years of age or older? YES NO

Name of Employer: _____

Occupation: _____

Business Phone Number: _____

The Fontana Municipal Code Section 2-341 (d) 6. provides that the City Council may consider multiple criteria in considering a candidate for appointment. Some of those criteria include the following: Total years of residency in the City of Fontana; Recent experience and/or understanding of municipal government or other public agencies; Volunteer experience and local community involvement; Financial management or budget experience; Knowledge of subject matter governed by the advisory board, commission or committee; Experience on other boards, commissions or committees; Supervisory and/or management experience; and Professional/business experience.

Please provide a professional resume in order to demonstrate any experience you have with the criteria noted above.

(See Additional Questions on Next Page)

FOR PLANNING COMMISSION: Please describe your experience in land use, including but not limited to planning, real estate and/or construction.

FOR PARKS, COMMUNITY AND HUMAN SERVICES COMMISSION: Please describe your experience with parks or community related activities or service and/or social or human services.

Memberships/Organizations/Community Participation (Professional, Community Service or Other):

Are you a source of income, source of gifts or campaign contributions to any current members of the City Council? Please specify.

Is there any other financial history between you and a current member of the City Council?

Are you a relative of any member of the Fontana City Council? YES NO

Have you ever been convicted of a felony? YES NO

Signature of Applicant

For Staff Use Only

Verification of Residency: _____ Date Appointed: _____

Dept. Staff Signature: _____