

## City of Moreno Valley

Teen Membership Application Form

For City Clerk's Use Stamp Date and Time Received

Name:	
How long have you resided in Mo	reno Valley?
	CONFIDENTIAL INFORMATION
Home Phone No.: Work Phone No.: Cell Phone No.:	E-mail Address:
Address:	ool:
Commission: 1 <sup>st</sup> choice	
Why do you wish to serve on this	
List any education, training, or spe Commission:	ecial skills, you have which may be relevant or of particular use to this
Explain briefly your understanding	g of what this Commission does, including its powers and limitations.
What do you hope to accomplish	by your participation?

List any employment, volunteer work, or membership in a service/community organization that you have served on, or are now a member of. Please provide the name(s) of the agency(ies) and dates served:

What other areas of interest do you have in our City government?
Would you be available for meetings during the day $\square$ or evening? $\square$
Attendance of at least one (1) meeting is required prior to the appointment. Date(s) of the meeting(s) attended:
Pursuant to Resolution 2016-42 all board or commission members must be registered voters of the City of Moreno Valley, provided they are at least 18 years old.
I hereby authorize the City of Moreno Valley to review, on a confidential basis, such information regarding me as may be contained in the California State Summary Criminal History and in records of the California Department of Motor Vehicles. Yes D No D (Not applicable to minors)
I hereby agree to attend all Commission meetings, unless excused, and understand that I may be removed for lack of attendance, pursuant to Municipal Code, Subsection 2.06.010(C) which states, "If a member is absent without advance permission of the board or commission or the appointing authority from three consecutive regular meetings or from 25% of the duly scheduled meetings of the board or commission within any fiscal year, the membership shall thereupon become vacant and shall be filled as any other vacancy."
CERTIFICATE OF APPLICANT: I certify that all statements in this application are true and complete to the best of my knowledge. I understand that any false statements of material fact will subject me to disqualification or dismissal if appointed. I release the City of Moreno Valley from any liability for the use of the aforesaid information.

Signature

Date

<u>Please Note</u>: Applications will be kept on file for potential future vacancies for one year after the application submittal date. Applications are accepted year-round. All applications are public record; personal information may be redacted to protect applicants' privacy.