

Date Received:

**PLANNING COMMISSION APPLICATION**

Thank you for your interest in serving the community as a member of the El Cajon Planning Commission.

Name: Date:

***The following questions represent the minimum qualifications to serve on the Planning Commission:***

Are you a resident of the City of El Cajon? Yes

No

How long have you lived in El Cajon?

**APPLICATIONS ARE ACCEPTED ON AN ONGOING BASIS UNTIL A SEAT IS AVAILABLE.**

***NOTE:*** *Once a Planning Commission application is filed with the City, it becomes a public record and is available to the public.*

# GENERAL INFORMATION

**Term of Office & Position Type:** The term of office & position type are to be determined.

**City Council:** The City of El Cajon is a charter city with a popularly elected mayor and a council- manager system of government. The five City Council members are elected for overlapping four- year terms with elections held in November of even-numbered years.

**Form 700:** Upon appointment, the candidate is required to file Form 700 according to the provisions of the Political Reform Act, the Fair Political Practices Commission, and the City’s Conflict of Interest.

**Selection Process:** The City Council will consider applications received and interviews will be scheduled accordingly.

OFFICE OF THE CITY CLERK | 200 Civic Center Way, El Cajon, CA 92020 | 619-441-1763

Applicant’s Name:

**APPLICANT INFORMATION**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SUPPLEMENTAL QUESTIONNAIRE**

Are you available for meetings? Mornings

Evenings

Both

Explain your interest in this position.

Have you been or are you now a member of a governmental board, commission, or committee? Yes  No 

If yes, please list:

Are you related to an employee of the City of El Cajon? Yes  No 

If yes, please indicate name and relationship:

Are you a registered voter? Yes  No 

If no, please explain:

# EMPLOYMENT & EDUCATION

Please list education, training, or special qualifications that you believe best qualifies you for this position.

Please list membership in service or community organizations or volunteer work that might be relevant to this position:

# EMPLOYMENT - CURRENT TO PAST

Name of Employer: Last job title: Dates of employment: From: To:

List the duties performed while you were at this company:

Name of Employer: Last job title: Dates of employment: From: To:

List the duties performed while you were at this company:

Name of Employer: Last job title: Dates of employment: From: To:

List the duties performed while you were at this company:

# Please submit the signed application by mail or in person.

Mail to: City Clerk’s Office, 200 Civic Center Way, El Cajon, CA 92020

Your application for the Gillespie Field Development Council will remain on file until an open seat/position is available, at which point you will be contacted with information regarding the interview process.

**ELIGIBILITY CERTIFICATION**

By signing below, I , certify that the information is true and correct to the best of my knowledge.

SIGNATURE DATE