



APPLICATION TO SERVE ON THE MANTECA SENIOR ADVISORY COMMISSION

NOTE: Please print or type. If you need additional space, please attach a separate sheet.

NAME: _____

ADDRESS: _____ **MANTECA, CA. 9533**__

OCCUPATION: _____ **FIRM:** _____

TELEPHONE (Business): _____ **(Home):** _____

EMAIL: _____

BACKGROUND, EDUCATION, EXPERIENCE:

SPECIAL QUALIFICATIONS FOR COMMISSION:

PRIOR PUBLIC SERVICE OR CIVIC ACTIVITY:

WHY DO YOU WANT TO SERVE?

ARE YOU A MANTECA RESIDENT?

YES

NO

DATE

SIGNATURE

**RETURN TO: OFFICE OF THE CITY CLERK
CITY OF MANTECA
1001 W. CENTER STREET
MANTECA, CA 95337**