APPLICATION FOR APPOINTMENT TO TRANSFORM FRESNO OUTREACH & OVERSIGHT COMMITTEE

Date:	
Name of Applicant:	
Organization and Position:	
Address:	
Telephone Number: Email:	
Are you a co-applicant or associated with a project?	Yes, I am a co-applicant or associated with a project No, I am not a co-applicant or associated with a project
Does the Applicant live, work or own property in the Transform Fresno Community Area ? See attached Map.	Live Work Own Property
Which project area do you represent?	Chinatown Downtown Southwest
Held eligible voter status	Yes, I held eligible voter status
on the former Community Steering Committee?	No, I did not hold eligible voter status
If you are not considered at this time, may we contact you in the future?	Yes No

Skills & Experience

Please detail your background and involvement in the Transformative Climate Communities process to date. Additionally, describe your proposed goals and how you will achieve these through a seat on the Outreach & Oversight Committee:



If this is not a self-nomination, please fill out below:

Nominated by:	
Position:	
Organization:	
Tel No:	
Email:	
I confirm I have gai	ined the nominee's consent for their name and details to go forward.
Signed:	
Date:	
I confirm that the	e above information is true. Falsified information is grounds for removal from the Outreach and Oversight Committee.
Signed:	
Date:	
	Please return to: Fresno City Hall ATTN: City Manager's Office
For Administratio	Executive Offices, Second Floor 2600 Fresno Street Fresno, CA 93721 or <u>transformfresno@fresno.gov</u> <u>By 9/12/18</u> n Use only:
	2600 Fresno Street Fresno, CA 93721 or <u>transformfresno@fresno.gov</u> <u>By 9/12/18</u>
For Administratio Date Received Method (email,	2600 Fresno Street Fresno, CA 93721 or <u>transformfresno@fresno.gov</u> <u>By 9/12/18</u>

**Please note, applicants or nominees must live, work or own property in the Transform Fresno Community Area. If the applicant nominee is found to not meet the requirements, they will be removed from the Outreach and Oversight Committee. Please attach proof of residency, ownership or employment to submittal.

