

**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 on the former Community Steering Committee? Yes, I held eligible voter status_____
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 gained the nominee's consent for their name and details to go forward.

Signed: _____

Date: _____

I confirm that the 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
Executive Offices, Second Floor
2600 Fresno Street
Fresno, CA 93721 or
transformfresno@fresno.gov
559-621-7799
By 9/30/18**

For Administration Use only:

Date Received _____

**Method (email,
paper, fax)** _____

*****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.***

