

**APPLICATION FOR APPOINTMENT TO THE ARTS & CULTURE COMMISSION
FOR THE CITY OF UNION CITY**

NAME: _____
(First) (Middle) (Last)

(Address)

Home Phone _____ Cell Phone _____ Work Phone _____

E-mail Address _____ How long have you lived in Union City? _____

Employment Present or Last Employer: _____

Occupation: _____

Describe your involvement in community activities, volunteer and civic organizations:

What is it about the Arts & Culture Commission that is compatible with your experience and of specific interest to you, and why?

List relevant education, training, experience, certificates of training, licenses, or professional registration:

How would you promote public art within the City?

If appointed, what specific goals would you like to see the Arts & Culture Commission achieve, and why? How would you suggest accomplishing this?

Signature: _____ Date: _____

PLEASE NOTE: Your completed application is subject to public disclosure in accordance with the Public Records Act. Additionally, a person holding a position on a Commission is required to file a Conflict of Interest Statement pursuant to the Political Reform Act and the City of Union City Conflict of Interest Code, and must obtain formal AB 1234 ethics training within 60 days of appointment and bi-annually thereafter. These filings are subject to public disclosure.

ONCE APPLICATION HAS BEEN COMPLETED, SUBMIT TO:
CITY OF UNION CITY
CITY CLERK'S OFFICE
34009 ALVARADO NILES ROAD
UNION CITY CA 94587

CITYCLERK@UNIONCITY.ORG

FOR MORE INFORMATION, CALL 510-675-5448