



CITY OF RIALTO COMMISSION/STUDENT COMMISSION APPLICATION

CITY CLERK'S DATE STAMP

Please print in ink or type all information required

APPLICANT INFORMATION: HIGH SCHOOL STUDENT? YES

FULL NAME _____

HOME ADDRESS, CITY, STATE & ZIP _____

() _____ () _____
HOME TELEPHONE NO. ALTERNATE TELEPHONE NO.

COMMISSION APPLYING FOR _____

WOULD YOU BE WILLING TO SERVE ON A COMMISSION YOU HAVE NOT APPLIED FOR? YES NO

DRIVERS LICENSE NUMBER _____ EXPIRATION DATE _____

AS AN ADULT, HAVE YOU EVER BEEN CONVICTED OF AN OFFENSE OTHER THAN A MINOR TRAFFIC VIOLATION?
IF "YES", PLEASE EXPLAIN BELOW. YES NO

PERSON TO NOTIFY IN AN EMERGENCY NAME PHONE NUMBER

EDUCATION (Circle Highest Year Completed) 7 8 9 10 11 12

DID YOU GRADUATE? YES NO

DID YOU RECEIVE A GED? YES NO

NAME OF COLLEGE OR UNIVERSITY	MAJOR	MINOR
	UNITS COMPLETED: SEMESTER _____ QUARTER _____	DEGREE AND YEAR
GRADUATE WORK - COLLEGE OR UNIVERSITY	MAJOR FIELD	DEGREE AND YEAR

CITY OF RIALTO COMMISSION APPLICATION PART 2

ARE YOU A REGISTERED VOTER IN THE CITY OF RIALTO?

YES

NO

ARE YOU WILLING TO BE FINGERPRINTED AND UNDERGO A BACKGROUND INVESTIGATION CONDUCTED
BY THE RIALTO POLICE DEPARTMENT?

YES

NO

EXPERIENCE: Please provide information which you feel will enhance your abilities for the Commission to which you are applying. It is necessary to submit a resume, accompanying this application, detailing your past and current employment experience.

APPLICANT'S STATEMENT AND SIGNATURE

I CERTIFY that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for Commission appointment as may be necessary in arriving at an appointment. I understand that this application is not, and is not intended to be, an assurance of appointment.

In the event of appointment, I understand that false or misleading information given in my application or interview(s) may result in my being discharged from the Commission. I also understand that I am required to abide by all rules and regulations of the City of Rialto relating to Commission procedures and protocol.

SIGNATURE

DATE

RETURN TO:
Rialto City Clerk's Office
Mail: 150 S. Palm Ave., Rialto, CA 92376
Address: 290 W. Rialto Ave., Rialto, CA 92376