



**APPLICATION FOR THE POSITION OF
ALTERNATE PUBLIC MEMBER**

IF YOU ARE INTERESTED IN SERVING AS THE PUBLIC ALTERNATE ON LAFCO, PLEASE COMPLETE THE FOLLOWING APPLICATION AND RETURN IT TO THE ADDRESS LISTED BELOW. THE APPLICATION DEADLINE IS **5:00 P.M. ON MONDAY, JULY 2, 2018.**

THANK YOU FOR YOUR INTEREST IN THE IMPERIAL LOCAL AGENCY FORMATION COMMISSION.

◆ NAME:

◆ MAILING ADDRESS:

◆ CITY, STATE, ZIP:

◆ PHONE NUMBER:

◆ EMAIL:

◆ LENGTH OF RESIDENCE IN IMPERIAL COUNTY:

◆ ARE YOU AN OFFICER/EMPLOYEE OF THE COUNTY, A CITY OR SPECIAL DISTRICT WITHIN IMPERIAL COUNTY?

YES

NO

◆ IF YES, NAME OF AGENCY:

◆ OCCUPATION:

◆ DUE TO YOUR CURRENT EMPLOYMENT OR OCCUPATION, DO YOU ANTICIPATE ANY CONFLICTS OF INTEREST REGARDING DECISION YOU WILL BE ASKED TO MAKE AS A LAFCO MEMBER? IF SO, PLEASE EXPLAIN.

◆ PREVIOUS/CURRENT BOARD, COMMISSION OR COMMITTEE SERVED:

◆ DATE LAST SERVED AS AN ELECTED OFFICIAL:

APPLICANT SIGNATURE

DATE