

Form Name: Incumbent Reappointment  
Unique ID: 1445456727

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On: 3/26/26  
By: MH

## Applicant Information

**Please accept my request to be reappointed to:** Arts Commission

**Name** Molly Kauffman

**Are you a Sunnyvale resident?** Yes

**How long have you lived in Sunnyvale?** Since 2001

**Description Area** Residence Notice: Unless otherwise noted, your principal place of residence must be in Sunnyvale. You must live in Sunnyvale at the time of appointment and at all times during service on a board or commission.

**Current Main Residence**

[REDACTED]

**Email**

[REDACTED]

**Phone**

[REDACTED]

**Description Area** Employment Notice City of Sunnyvale employees may not serve on a Board or Commission.

**I am a current City of Sunnyvale employee.** No

**How long have you served on your current board or commission?** 4 years

**Have you ever served on another City of Sunnyvale board or commission?** No

**What new information about your qualifications would you like Council to know?** After serving four years on the Arts Commission, I have developed a deeper understanding of its goals and operations. During this time, I have also strengthened my communication and collaboration skills.

Looking ahead, I would like the Commission to more clearly outline the pros and cons of each artist proposal presented to the City Council. Additionally, I encourage continued efforts to find meaningful ways to incorporate performance art into the Commission's work.

**Reasons you wish to be reappointed.**

Serving on the Arts Commission has been both rewarding and enjoyable. When walking or driving around Sunnyvale, it is a pleasure to see completed public art projects that have come before the Commission. It is especially satisfying to witness the community's engagement with and connection to the artwork.

**Any additional information related to your reappointment?**

I love living in Sunnyvale and hope to continue contributing to the community.

**Your Agreement****Description Area**

**IMPORTANT NOTICE - READ BEFORE SIGNING:**By selecting both "Yes" and "Submit Form" below I am adding my digital signature to this application. I am also agreeing with the following statements:All statements I have made on this application are true and correct.I authorize the City of Sunnyvale (City) to investigate the accuracy of this information.I release the City from all claims and liabilities arising from such investigation.I acknowledge that any false statement on this application will be grounds for the City to deny my appointment. A false statement discovered later, will be grounds to dismiss me from my appointment at any time.I acknowledge that any false statement on this application could lead to criminal charges. Charges could fall under California Penal Code, Section 115 or other applicable law.

**I agree**

Yes

**Your full name**

Molly Kauffman

**Date**

Mar 26, 2026