

CITY OF SUNNYVALE
CHARTER REVIEW COMMITTEE APPLICATION

Office Use Only

Date Received: _____

Voter registration
Checked: _____

Please print or type answers to all questions. Write N/A if not applicable.

Eligibility requirements: Sunnyvale resident and registered voter in Sunnyvale. Contact the Office of the City Clerk at (408) 730-7483, cityclerk@sunnyvale.ca.gov with any questions.

IMPORTANT NOTICE

Information provided on this application becomes a public record after it is officially filed. This document will be published to the City website with the interview materials. Personal contact information will be redacted.

Applicant Name:

LastFirstM.I

Current Residence

StreetCityStateZip

Email Address:

Phone Number:

How long have you been a resident of Sunnyvale?

Are you a currently-registered voter in Sunnyvale?

When was the last time you voted?
Month/Year

Have you previously served as a City Councilmember?

If yes, when?

Term served

Term served

Have you served on a previous City of Sunnyvale Charter Review Committee?

If yes, in what year?

Are you currently serving or have you served on a City of Sunnyvale board or commission?

If yes, which one?

Term currently serving

Term previously served

Are you currently serving or have you served on a City of Sunnyvale staff advisory committee?

If yes, which one?

Term currently serving

Term previously served

1. What motivated you to apply for the Charter Review Committee?

2. What skills or attributes can you bring to the Charter Review Committee?

3. Education: List college degrees and majors, and any relevant training or experience that demonstrates your ability to effectively serve on the Charter Review Committee.

4. Briefly describe your current or last occupation.

5. Have you attended a City Council, board or commission meeting? If so, please describe what you learned and what improvements you would suggest the City consider.

6. Describe your involvement in community activities, volunteer and civic organizations.

Applicant Name: _____

7. The City has a [Code of Ethics and Conduct for Elected and Appointed Officials](#) that appointed members are required to follow. Do you have any concerns in this area? If so, please describe.

I certify under penalty of perjury that all statements I have made on this application are true and correct. I hereby authorize the City of Sunnyvale to investigate the accuracy of this information from any person or organization, and I release the City of Sunnyvale and all persons and organizations from all claims and liabilities arising from such investigation or the supplying of information for such investigation. I acknowledge that any false statement or misrepresentation on this application or supplementary materials will be cause for refusal of appointment or immediate dismissal at any time during the period of my appointment.

Your application is not complete until this application is completed, signed and submitted to the Office of the City Clerk, 603 All America Way, Sunnyvale, CA 94086.

Signature of Applicant _____ Date _____

Pursuant to the Americans with Disabilities Act (ADA), the City of Sunnyvale will make reasonable efforts to accommodate persons with qualified disabilities during the n interview process. Should you require special accommodations, please contact the Office of the City Clerk at (408) 730-7483 or cityclerk@sunnyvale.ca.gov at least 48 hours in advance of your scheduled interview.