

CITY OF VISTA YOUTH VOLUNTEER SERVICES APPLICATION

**Office of the City Clerk
200 Civic Center Drive, Vista, CA 92084
Phone: 760.643.5320 Fax: 760.639.6126
Email: kvaldez@cityofvista.com**

Please note: Under the Public Records Act, this completed application becomes a Public Record and must be disclosed upon request.

NAME: _____ DATE: _____

SCHOOL: _____ GRADE (in 2016/17 School Year): _____

Is your school in the Vista Unified School District or located in the City of Vista? _____

I am interested in serving on the following Commissions:

_____ PUBLIC ARTS COMMISSION
Meets 1st Tuesday of Month
at 6:30 pm

_____ PLANNING COMMISSION
Meets 1st & 3rd Tuesdays of Month
at 6:00 pm

_____ PARKS & RECREATION
COMMISSION
Meets 4th Monday of Month at 6:00 pm

_____ COMMUNITY SAFETY COMMISSION
Meets 2nd Thursday of every other Month
at 5:30 pm

_____ YOUTH COMMISSION
Meets 3rd Wednesday of Month at 4:30

QUALIFICATIONS AND SPECIAL INTERESTS: (This information is optional)

Past Public Service and/or Employment History (if applicable):

Other Qualifications & Special Interests:

Phone: _____ E-mail: _____

Home Address: _____

City: _____ Zip: _____

Signature

Date