



**City of Sebastopol**

**APPLICATION FOR APPOINTMENT  
TO  
CITY OVERSIGHT COMMITTEE FOR ENTERPRISE FUNDS**

Contact Information

City of Sebastopol Public Works Department  
714 Johnson Street  
Sebastopol, CA 95472  
Email: [citypw@cityofsebastopol.gov](mailto:citypw@cityofsebastopol.gov)  
Phone: 707-823-5331

Office Hours: Monday - Thursday - 7:00 am - 5:30 pm (closed 12:00 pm – 12:30 pm for lunch)  
Closed every Friday

Instructions:

Use this form to apply to serve on any of the City of Sebastopol's Boards, Committees or Commissions. Please complete the entire form and either print and mail it to the address above, or email your completed application to [citypw@cityofsebastopol.gov](mailto:citypw@cityofsebastopol.gov). If a question does not apply, please note as not applicable. Please deliver completed form, by the date and time due, to the City of Sebastopol Public Works Department. All applications will be reviewed by the City Council. If appointed, you have a choice whether you wish to have your contact information visible to the public; however, your information may be made public upon request by (a) member(s) of the public.

The Committee shall be composed of no more than six (6) members who are at least 18 years of age, reside or have a business in Sebastopol, and have one of the following qualifications:

- One member of the City Council
- At least one person who owns or is a representative of a business in the City of Sebastopol City limits
- At least two people who are residents of the City of Sebastopol and actively engaged in City governance (such as active engagement with the Council)
- At least one person who is a resident of the City of Sebastopol and who has expertise in accounting, auditing, or another financial field

**Applying for:** Oversight Committee for Enterprise Funds

**What category is being applied for?**

Person who owns or is a representative of a business in the City of Sebastopol City limits

Person who is a resident of the City of Sebastopol and actively engaged in City governance (such as active engagement with the Council)

Person who is a resident of the City of Sebastopol and who has expertise in accounting, auditing, or another financial field



## City of Sebastopol

Name of Applicant:

Home Address:

City, State Zip

Home Phone Number:

If appointed, do you want this number to be visible to the public?

Yes                      No

Work Phone Number:

If appointed, do you want this number to be visible to the public?

Yes                      No

Cell Phone Number:

If appointed, do you want this number to be visible to the public?

Yes                      No

E-Mail Address:

If appointed, do you want this address to be visible to the public?

Yes                      No

Are you a registered voter in Sebastopol?

Yes                      No

If so, for how long?

Do you hold a current business license from the City of Sebastopol?

Yes                      No

If so, for how long?

Have you attended a meeting of this body? When? (As this is a new committee, it would be beneficial to talk to the budget committee members or city staff for reference to enterprise funds). Please indicate if you have watched a budget committee meeting or discussed with Council committee member or staff.

Yes                      No

Have you served on, interviewed for, or applied for this body previously? Not Applicable



## **City of Sebastopol**

Present Employer:

Job Title:

Have you previously served on any governmental bodies or held elected office? If so please list position held and dates:

Please list civic or charitable organization to which you belong or have belonged:

Have you been an officer in any of these organizations? If so, please list position held and dates:

What special interests, skills and talents would you bring to this board, commission, or committee?

Please list any college, professional or vocational schools you have attended with major subject studied, dates and any earned degrees:

Please list any special awards or recognition you have received:

Please state why you would like to become a member of this board, commission or Committee, including what specific objectives you would be working toward as a member of this body:

Are you associated with any organization/employment that might be deemed a conflict of interest in performing your duties if appointed to this position?

Yes

No



## City of Sebastopol

If yes, please state name of organization/employment:

City policy directs all appointed, advisory body members not to vote on matters where there exists a potential conflict of interest such as property ownership near a project, or a financial relationship with the applicant. Would you be willing to abstain from voting if such a conflict arises?

Yes

No

How did you hear about this opening?

Is there any other information that you feel would be useful to the City Council in reviewing your application and materials provided with the application?

What do you think qualifies you to be appointed to this board/committee/commission?

Are there particular issues you think the board/committee/commission should concentrate on?

How should community comments be integrated into the board/committee/commission decision-making process?

If appointed, how would you handle it if another board/committee/commission member vehemently disagrees with your comments on a regular basis?



## **City of Sebastopol**

How would you handle a situation where a proposal comes before your board/committee/commission that the City staff finds consistent with City policies and standards, but that you personally do not support?

I certify that I have thoroughly read and understand all material in this application.

Applicant's Signature :

Applicant's Name (PLEASE PRINT):

Date: