

DATE RECEIVED:

City of Paso Robles
APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/COMMISSION

SEP 01 2017

Name of Advisory Body: YOUTH COMMISSION

GRADE ENTERING INTO: 10

Name of Applicant: Lauren A. Athey
First Name Middle Initial Last Name

Street Address: [REDACTED] City: Paso Robles Zip: 93446

Mailing Address: [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]
(if different from home) PO Box number City State Zip

Home Phone: [REDACTED] Cell Phone: [REDACTED] E-mail: [REDACTED]

Employer (if applicable) [REDACTED]

Work Phone: [REDACTED] Work Fax: [REDACTED] E-mail: [REDACTED]

E D U C A T I O N A N D T R A I N I N G

High School Paso Robles High School Paso Robles CA
Name City State

College [REDACTED] [REDACTED] [REDACTED]
Name City State

Other Schools/ Training Georgia Brown Dual Immersion Spanish Education, CPR Certified, Babysitting Certified

MEMBERSHIP IN ORGANIZATIONS: Girl Scouts of America (11 years)

A D V I S O R Y B O D Y / C O M M I T T E E / C O M M I S S I O N A P P O I N T M E N T S

Current [REDACTED] From [REDACTED] To [REDACTED]
Previous [REDACTED] From [REDACTED] To [REDACTED]
Previous [REDACTED] From [REDACTED] To [REDACTED]

A D D I T I O N A L I N F O R M A T I O N

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body. I believe I should be appointed to this advisory body because I want to help influence the ideas in our city. I am interesting in leadership and want to be an informed citizen. My brother, Ethan, was on the Youth Commission for four years and he though it was valuable experience.

R E A D C A R E F U L L Y

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Further, if my home address and telephone number are otherwise non-disclosable under the California Public Records Act (California Government Code §6250 et seq.), I understand that by agreeing to the release of the information above, this information is being released to the public upon request made under the Public Records Act.

Date: 9/1/17

Signature: [REDACTED]

If appointed to a City committee, commission or other advisory body, I DO NOT authorize the City to post my contact information on its website or to release such information to a third party who may post the information their website. The City may, however, disclose on the Internet and in all other appropriate places that I serve on a City committee, commission or other advisory body.

DATE RECEIVED:

4/4/17

City of Paso Robles
APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/COMMISSION

Name of Advisory Body: YOUTH COMMISSION

GRADE ENTERING INTO: 9th

Name of Applicant: Sasha A Baer
First Name Middle Initial Last Name

Street Address: [Redacted] City: Paso Robles Zip: 93446

Mailing Address: [Redacted] PO Box number City State Zip

Home Phone: [Redacted] Cell Phone: [Redacted] E-mail: [Redacted]

Employer (if applicable)

Work Phone: [Redacted] Work Fax: [Redacted] E-mail: [Redacted]

EDUCATION AND TRAINING

High School Name City State

College Name City State

Other Schools/ Training Lewis Middle School

MEMBERSHIP IN ORGANIZATIONS: Lewis Leadership, United States Pong Club

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

Current From To
Previous From To
Previous From To

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body. For the past two years, I have been involved in Lewis Leadership and its so rewarding when I can make a difference. Last month I took part in speaking in front of City Council and we passed the ordinance for smoking in public places. I would love the opportunity to continue to make Paso a better place by being part of the youth commission.

READ CAREFULLY

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Date: 4/4/17 Signature [Redacted]

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DATE RECEIVED:
3/2/17

City of Paso Robles
APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/COMMISSION

Name of Advisory Body: YOUTH COMMISSION GRADE ENTERING INTO: 11th

Name of Applicant: Sophia M Baer
First Name Middle Initial Last Name

Street Address: [Redacted] City: Paso Robles Zip: 93446

Mailing Address: _____
(if different from home) PO Box number City State Zip

Home Phone: X Cell Phone: [Redacted] E-mail: [Redacted]

Employer (if applicable) _____

Work Phone: X Work Fax: X E-mail: X

EDUCATION AND TRAINING

High School Paso Robles High School Paso Robles CA
Name City State

College _____
Name City State

Other Schools/ Training _____

MEMBERSHIP IN ORGANIZATIONS: National Barrel Horse Association, Young Eagles, Experimental Aircraft Association, AOPA, California Scholastic Federation

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS
Current Paso Robles Youth Commission From 4/30/15 To 6/30/17
Previous _____ From _____ To _____
Previous _____ From _____ To _____

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body. I believe I should be appointed to this advisory body because I had a great experience on my previous term by learning leadership skills, how to maintain a strong and effective city, and I would love to continue my growth in working on these skills. I would also continuing to benefit my community.

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Further, if my home address and telephone number are otherwise non-disclosable (see Code §6250 et seq.), I understand that by agreeing to the release of the information above, this information will be made available under the Public Records Act.

Date: 4/4/16
Signature: [Redacted]

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DATE RECEIVED:

City of Paso Robles
APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/COMMISSION

SEP 01 2017

Name of Advisory Body: YOUTH COMMISSION

GRADE ENTERING INTO: 12

Name of Applicant: Joseph T. Cantrell
First Name Middle Initial Last Name

Street Address: [Redacted] City: Paso Robles Zip: 93446

Mailing Address: [Redacted] Paso Robles CA 93446
(if different from home) PO Box number City State Zip

Home Phone: [Redacted] Cell Phone: [Redacted] E-mail: [Redacted]

Employer (if applicable) Betian Webb - YouthWorks - Oak Park

Work Phone: [Redacted] Work Fax: N/A E-mail: N/A

EDUCATION AND TRAINING

High School Paso Robles High School Paso Robles CA
Name City State

College N/A
Name City State

Other Schools/ Training N/A

MEMBERSHIP IN ORGANIZATIONS: GEO Club, Kickback Club (creation in progress)
Chess Club, Varsity Track and Field, Ravine Water Park employee,
Boys State Alternative

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

Current _____ From _____ To _____
Previous _____ From _____ To _____
Previous _____ From _____ To _____

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body. I would like to be appointed to the Youth Commission because I am ready and willing to serve the people of Paso Robles. I will make sure every voice is heard and fairly represented.

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Date: August 30, 2017

Signature [Redacted]

If appointed to a City committee, commission or other advisory body, I **DO NOT** authorize the City to post my contact information on its website or to release such information to a third party who may post the information their website. The City may, however, disclose on the Internet and in all other appropriate places that I serve on a City committee, commission or other advisory body.

APPLICATION FOR APPOINTMENT TO A CITY ADVISORY BODY/COMMITTEE/ COMMISSION

SEP 01 2017

Name of Advisory Body: Youth Commission

Name of Applicant: Haley J. Castillo

Street Address: [Redacted] City, Zip: Paso Robles, 93446

Mailing Address: (if different from home) P.O. Number City State Zip

Home Phone: [Redacted] Home Fax: [Redacted] E-mail: [Redacted]

Retired? [] Occupation (if applicable) N/A

Employer (if applicable) N/A

Work Phone: [Redacted] Work Fax: [Redacted] E-mail: N/A

EDUCATION & TRAINING GRADE ENTERING INTO 11

High School Paso Robles High School Paso Robles CA

College [Redacted] Name City State

Degrees/Majors N/A

Other Schools/Training N/A

MEMBERSHIP IN ORGANIZATIONS

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

TERM

Current [] Current [] Previous [] Previous [] Previous []

From [] To [] From [] To [] From [] To [] From [] To [] From [] To []

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body.

I believe I should be appointed to this advisory body because I have been apart of the PPHS leadership for two years now and work quite a bit with both the community and school. I have also been a cheerleader for five years now and am currently apart of the PPHS Varsity cheerleading team. I also was apart of Paso High's FFA program for two years and have learned key qualities that a young adult should possess through everything I have been involved in. I take part in many programs and work hard to represent them well.

UPON RECEIPT OF A TIMELY FILED APPLICATION, THE CITY CLERK'S OFFICE WILL SEND NOTIFICATION TO EACH APPLICANT AND A CITY COUNCIL INTERVIEW SCHEDULE WILL BE ARRANGED.

LAST NAME Castillo

COMMITTEE NAME Youth Commission

READ CAREFULLY

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- Home address, Home phone number, Home Fax number, Business address, Business phone number, Business fax number, Cell Phone Number, Personal E-mail address, Business e-mail address

Further, if my home address and telephone number are otherwise non-disclosable under the California Public Records Act (California Government Code §6250 et seq.), I understand that by agreeing to the release of the information above, this information may be provided by the City in response to a request made under the Public Records Act.

Date 8/31/17

[Redacted Signature]

If appointed to a City committee, commission or other advisory body, I DO NOT authorize the City to post my contact information on

DATE RECEIVED:

City of Paso Robles
APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/COMMISSION

AUG 30 2017

Name of Advisory Body: YOUTH COMMISSION GRADE ENTERING INTO: 12

Name of Applicant: Valeria Cisneros
First Name Middle Initial Last Name

Street Address: _____ City: Paso Robles Zip: 93446

Mailing Address: _____
(if different from home) PO Box number City State Zip

Home Phone: N/A Cell Phone: _____ E-mail: _____

Employer (if applicable) _____
Work Phone: _____ Work Fax: _____ E-mail: _____

EDUCATION AND TRAINING

High School Paso Robles High School Paso CA
Name City State

College _____
Name City State

Other Schools/ Training _____

MEMBERSHIP IN ORGANIZATIONS: The YMCA youth Institute, Crimson
News Magazine

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

Current Superintendent From _____ To _____
Previous superintendent advisory board From 2016 To 2017
Previous _____ From _____ To _____

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body. I want to join the committee to represent the Hispanic community as well as to help the community in any way I can.

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Date: 08/28/17 _____
Signature _____

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City of Paso Robles

APPLICATION FOR APPOINTMENT TO A CITY ADVISORY BODY/COMMITTEE/ COMMISSION

SEP 01 2017

Name of Advisory Body: Youth Commission

Name of Applicant: ELAINE A DAVIS (First Name, Middle Initial, Last Name)

Street Address: [Redacted] City, Zip: Paso Robles 93446

Mailing Address: [Redacted] (if different from home) P.O. Number City State Zip CA 93446

Home Phone [Redacted] Home Fax: () E-mail: [Redacted]

Retired? [] Occupation (if applicable)

Employer (if applicable)

Work Phone: () Work Fax: () E-mail:

EDUCATION & TRAINING

GRADE ENTERING INTO 11th

High School Paso Robles High School Paso Robles CA (Name, City, State)

College (Name, City, State)

Degrees/Majors

Other Schools/Training

MEMBERSHIP IN ORGANIZATIONS

FFA Chapter Secretary

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

TERM

Table with columns for appointment type (Current, Previous) and term (From, To)

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body.

UPON RECEIPT OF A TIMELY FILED APPLICATION, THE CITY CLERK'S OFFICE WILL SEND NOTIFICATION TO EACH APPLICANT AND A CITY COUNCIL INTERVIEW SCHEDULE WILL BE ARRANGED.

LAST NAME Davis COMMITTEE NAME Youth Commission

READ CAREFULLY

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Further, if my home address and telephone number are otherwise non-disclosable under the California Public Records Act (California Government Code §6250 et seq.), I understand that by agreeing to the release of the information above, this information may be provided by the City in response to a request made under the Public Records Act.

Date 8/31/17

If appointed to a City committee, commission or other advisory body, I DO NOT authorize the City to post my contact information on its Web site.

DATE RECEIVED:
Aug. 31st, 2017

City of Paso Robles
APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/COMMISSION

SEP 01 2017

Name of Advisory Body: YOUTH COMMISSION GRADE ENTERING INTO: _____

Name of Applicant: Katherine A Dickinson
First Name Middle Initial Last Name

Street Address: _____ City: Bradley Zip: 93426

Mailing Address: _____
(if different from home) PO Box number City State Zip

Home Phone: _____ Cell Phone: _____ E-mail: _____

Employer (if applicable) _____

Work Phone: _____ Work Fax: _____ E-mail: _____

EDUCATION AND TRAINING

High School Paso Robles High School Paso Robles California
Name City State

College _____
Name City State

Other Schools/ Training Department of Defense internship at Fort Hunter Liggett

MEMBERSHIP IN ORGANIZATIONS: Army Team Building Program, International Club, President of Interpreting Club

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

Current _____ From _____ To _____
Previous _____ From _____ To _____
Previous _____ From _____ To _____

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body. I can offer this board a unique perspective due to my military background and knowledge of various cultures and languages. I focus greatly on collaboration and value the diversity of our community. I hope to enrich our community further by increasing cultural awareness/tolerance and awareness of military youth/families.

READ CAREFULLY

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Date: August 31st, 2017 _____
Signature

If appointed to a City committee, commission or other advisory body, I **DO NOT** authorize the City to post my contact information on its website or to release such information to a third party who may post the information their website. The City may, however, disclose on the Internet and in all other appropriate places that I serve on a City committee, commission or other advisory body.

DATE RECEIVED:

City of Paso Robles
APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/COMMISSION **AUG 30 2017**

Name of Advisory Body: YOUTH COMMISSION GRADE ENTERING INTO: 12

Name of Applicant: Araceli G. Gomez
First Name Middle Initial Last Name

Street Address: _____ City: Paso Robles Zip: 93496

Mailing Address: _____
(if different from home) PO Box number City State Zip

Home Phone: _____ Cell Phone: _____ E-mail: _____

Employer (if applicable) _____

Work Phone: _____ Work Fax: _____ E-mail: _____

EDUCATION AND TRAINING

High School Paso Robles High School Paso Robles CA
Name City State

College _____
Name City State

Other Schools/ Training _____

MEMBERSHIP IN ORGANIZATIONS: Make A Change Club

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

Current _____ From _____ To _____
Previous _____ From _____ To _____
Previous _____ From _____ To _____

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body. I know I can provide for the well-being and benefit of my community by giving my best input on relevant issues concerning our citizens.

READ CAREFULLY

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Date: 8/28/17

Signature: _____

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APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/ COMMISSION

Name of Advisory Body: Youth Commission

Name of Applicant: Mark A. Martinez
First Name Middle Initial Last Name

Street Address: [Redacted] City, Zip: 93446

Mailing Address: Same as above
(if different from home) P.O. Number City State Zip

Home Phone: [Redacted] Home Fax: () E-mail: [Redacted]

Retired? Occupation (if applicable) N/A

Employer (if applicable) N/A

Work Phone: () N/A Work Fax: () N/A E-mail: N/A

EDUCATION & TRAINING GRADE ENTERING INTO 11th

High School Paso Robles High School Paso Robles CA
Name City State

College N/A
Name City State

Degrees/Majors N/A

Other Schools/Training N/A

MEMBERSHIP IN ORGANIZATIONS

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

	TERM	
Current _____	From _____	To _____
Current _____	From _____	To _____
Previous _____	From _____	To _____
Previous _____	From _____	To _____
Previous _____	From _____	To _____

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body.

I believe I can bring a lot of good information to the advisory body because I am involved in a lot in school. In 3 AP classes and honors. I'm also apart of Advanced Dance. Outside school I play football, baseball, and basket ball. These activities put me in the loop so I can relay information to better the school and the community.

UPON RECEIPT OF A TIMELY FILED APPLICATION, THE CITY CLERK'S OFFICE WILL SEND NOTIFICATION TO EACH APPLICANT AND A CITY COUNCIL INTERVIEW SCHEDULE WILL BE ARRANGED.

LAST NAME Martinez COMMITTEE NAME Youth Commission

READ CAREFULLY

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 Home address Business address Cell Phone Number
 Home phone number Business phone number Personal E-mail address
 Home Fax number Business fax number Business e-mail address

Further, if my home address and telephone number are otherwise non-disclosable under the California Public Records Act (California Government Code §6250 et seq.), I understand that by agreeing to the release of the information above, this information may be provided by the City in response to a request made under the Public Records Act.

Date 8/31/17 Signature [Redacted]

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Date 8/31/17 Signature [Redacted]

DATE RECEIVED:

City of Paso Robles
APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/COMMISSION

SEP 01 2017

Name of Advisory Body: YOUTH COMMISSION

GRADE ENTERING INTO: 11

Name of Applicant:

Sofia
First Name

A
Middle Initial

Moses
Last Name

Street Address:

[Redacted]

City:

Paso Robles

Zip:

93446

Mailing Address:
(if different from home)

N/A

PO Box number

City

State

Zip

Home Phone:

N/A

Cell Phone:

[Redacted]

Mail:

[Redacted]

Employer (if applicable)

N/A

Work Phone:

Work Fax:

E-mail:

EDUCATION AND TRAINING

High School

Paso Robles High School, Paso Robles, CA
Name City State

College

N/A
Name City State

Other Schools/ Training

N/A

MEMBERSHIP IN ORGANIZATIONS:

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

Current

From

To

Previous

From

To

Previous

From

To

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body.

I want to make an impact from a youth's point of view, creating unity in the community and making new traditions in the city.

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Date: 08-31-17

[Redacted Signature]

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DATE RECEIVED:

City of Paso Robles
APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/COMMISSION

AUG 24 2017

Name of Advisory Body: YOUTH COMMISSION

GRADE ENTERING INTO:

Name of Applicant: Josh T Ramus
First Name Middle Initial Last Name

Street Address: [Redacted] City: Paso Robles Zip: 93446

Mailing Address: [Redacted] [Redacted] [Redacted] [Redacted] [Redacted]
(if different from home) PO Box number City State Zip

Home Phone: [Redacted] Cell Phone: [Redacted] E-mail: [Redacted]

Employer (if applicable) _____

Work Phone: _____ Work Fax: _____ E-mail: _____

EDUCATION AND TRAINING

High School Paso Robles Highschool Paso Robles CA
Name City State

College _____
Name City State

Other Schools/ Training Trinity Lutheran School, Kermit King

MEMBERSHIP IN ORGANIZATIONS: _____

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

Current _____ From _____ To _____
Previous _____ From _____ To _____
Previous _____ From _____ To _____

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body. I played Basketball last year and do volleyball. I had a 4.5 GPA last year and I attend a youth group. My brother has special needs and I want to help other kids with special needs feel accepted.

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Date: 8/23/17 Signature: [Redacted]

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APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/ COMMISSION

SEP 0 1 2017

Name of Advisory Body: Paso Robles Youth Commission

Name of Applicant: Kate E Reupold
First Name Middle Initial Last Name

Street Address: [REDACTED] City, Zip: Paso Robles, 93446

Mailing Address: [REDACTED]
(if different from home) P.O. Number City State Zip

Home Phone [REDACTED] Home Fax: () E-mail: [REDACTED]

Retired? Occupation (if applicable) _____

Employer (if applicable) _____

Work Phone: () Work Fax: () E-mail: _____

EDUCATION & TRAINING GRADE ENTERING INTO 11

High School Paso Robles Highschool Paso Robles CA
Name City State

College _____
Name City State

Degrees/Majors _____

Other Schools/Training _____

MEMBERSHIP IN ORGANIZATIONS
VP at Interact club

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS	TERM
Current _____	From _____ To _____
Current _____	From _____ To _____
Previous _____	From _____ To _____
Previous _____	From _____ To _____
Previous _____	From _____ To _____

ADDITIONAL INFORMATION
Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body.

UPON RECEIPT OF A TIMELY FILED APPLICATION, THE CITY CLERK'S OFFICE WILL SEND NOTIFICATION TO EACH APPLICANT AND A CITY COUNCIL INTERVIEW SCHEDULE WILL BE ARRANGED.

LAST NAME Reupold COMMITTEE NAME Youth Commission

READ CAREFULLY

This is a public document. I understand that all information contained within it will be provided to the public upon request.

If appointed to a City committee, commission or other advisory body, I authorize the City to post the following on its Web site. I understand that other Web sites not controlled by the City may provide links to a City Web page that has my personal information on it. I also authorize the City to update my personal contact information on its Web site if my contact information changes.

- | | | |
|--|--|--|
| <input type="checkbox"/> Home address | <input type="checkbox"/> Business address | <input type="checkbox"/> Cell-Phone Number |
| <input type="checkbox"/> Home phone number | <input type="checkbox"/> Business phone number | <input type="checkbox"/> Personal E-mail address |
| <input type="checkbox"/> Home Fax number | <input type="checkbox"/> Business fax number | <input type="checkbox"/> Business e-mail address |

Further, if my home address and telephone number are otherwise non-disclosable under the California Public Records Act (California Government Code §6250 et seq.), I understand that by agreeing to the release of the information above, this information may be provided by the City in response to a request made under the Public Records Act.

Date _____ Signature _____

If appointed to a City committee, commission or other advisory body, I **DO NOT** authorize the City to post my contact information on its Web site or to release such information to a third party who may post the information on their Web site. The City may, however, disclose on the Internet and in all other appropriate places that I serve on a City committee, commission or other advisory body.

Date Sep. 1, 2017 [REDACTED]



City of Paso Robles

Application for Appointment

TO A CITY ADVISORY BODY/ COMMITTEE/ COMMISSION

DATE RECEIVED: **APR 14 2017**

Applicant Information

Advisory Body Applying to: **YOUTH COMMISSION**

Grade Entering Into: _____

Applicant Name: **Cori Southward**

Email Address: [REDACTED]

Phone [REDACTED]

Street Address: [REDACTED]

City: **Paso Robles**

State: **California**

ZIP Code: **93446**

Mailing Address (if different from home)

City: **Paso Robles**

State: **California**

ZIP Code: **93446**

Education and Training

High School

Sophomore at Paso Robles High School

College

Other Schools/Training

MEMBERSHIP IN ORGANIZATIONS:

Junior Samaritans - Acting President

Advisory Body/ Committee/ Commission Appointments

Current:

Dates From:

To:

Current:

Dates From:

To:

Previous:

Dates From:

To:

Previous:

Dates From:

To:

Additional Information

Please provide any supplemental information to this application, including the specific reason you believe you appointed to this advisory body.

I want to use the opportunity that this advisory body has presented to improve the life of the youth in Paso Robles.

READ CAREFULLY

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Date:

4/13/17

Signature:

[REDACTED]

If appointed to a City Committee, commission or other advisory body, I **DO NOT** authorize the City to post my contact information on its website or to release such information to a third party who may post the information on their website. The City may, however, disclose on the Internet and in all other appropriate places that I serve on a City committee, commission or other advisory body.

Date:

4/13/17

Signature:

[REDACTED]

APPLICATION DEADLINE: FRIDAY, APRIL 7, 2017 at 5:00 p.m.

SEP 0 1 2017

City of Paso Robles
APPLICATION FOR APPOINTMENT
TO A CITY ADVISORY BODY/COMMITTEE/COMMISSION

DATE RECEIVED:

Name of Advisory Body: YOUTH COMMISSION GRADE ENTERING INTO: 10

Name of Applicant: Ysabel G Wulfin
First Name Middle Initial Last Name

Street Address: _____ City: Paso Robles Zip: 93446

Mailing Address: _____
(if different from home) PO Box number City State Zip

Home Phone: _____ Cell Phone: _____ E-mail: _____

Employer (if applicable) _____
Work Phone: _____ Work Fax: _____ E-mail: _____

EDUCATION AND TRAINING

High School Paso Robles High School Paso Robles CA
Name City State

College N/A
Name City State

Other Schools/ Training N/A

MEMBERSHIP IN ORGANIZATIONS: Girl Scouts, Studios on the Park volunteer
Crimson News Magazine, Interact club

ADVISORY BODY/COMMITTEE/COMMISSION APPOINTMENTS

Current _____ From _____ To _____
Previous _____ From _____ To _____
Previous _____ From _____ To _____

ADDITIONAL INFORMATION

Please provide any supplemental information to this application, including the specific reason you believe you should be appointed to this advisory body. Throughout the years of growing up in Paso I have come to believe in the power of community and have become increasingly apt to helping it any way I can to make it a better place.

READ CAREFULLY

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Further, if my home address and telephone number are otherwise non-disclosable under the California Public Records Act (California Government Code §6250 et seq.), I understand that by agreeing to the release of the information above, this information may be provided by the City in response to a request mad under the Public Records Act.

Date: 8/29/17 _____
Signature: _____

If appointed to a City committee, commission or other advisory body, I **DO NOT** authorize the City to post my contact information on its website or to release such information to a third party who may post the information their website. The City may, however, disclose on the Internet and in all other appropriate places that I serve on a City committee, commission or other advisory body.