

Thank you for your interest in applying for the appointment position of District 2 City Councilmember. Please complete the form in full, including the corresponding supplemental questionnaire.

Applications are due by January 20, 2021 by 6 p.m.

If completing the form by hand, please print clearly. Please submit your complete application to the City Clerk's Office at City Hall <u>or</u> by email:

DROP OFF: Office of the City Clerk, 300 W. Third Street, 4th Floor, Oxnard CA 93030 EMAIL: <u>cityclerk@oxnard.org</u>

For questions about the application, please contact the Office of the City Clerk at (805) 385-7803 or via email at <u>cityclerk@oxnard.org</u>.

SECTION I: CRITERIA

N Ventura

Oxnard BI

W-Second St

Name:		Date of Birth:
Address and Zip Code:		
Registered Voter: Yes	No	Email Address:
Council District No.: included below.)	_* (Viev	v online at <u>https://arcg.is/jDP</u> . A District map is also
* Appointment candidates n	nust live i	in District 2.
		COUNCIL DISTRICT 2



SECTION II: SUPPLEMENTAL INFORMATION

1. Please describe your community activities in which you are or have been engaged in Oxnard. Include the organization, your role, a brief description of your activities, and your dates of participation:

(If more space is needed, please continue on a separate page.)



2. Please state why you would make a good representative for District 2. (*If more space is needed, please continue on a separate page.*)



3. Please discuss any experience you have with policymaking, legislation, budgeting or other related experience. This can include the private, public or non-profit sector. *(If more space is needed, please continue on a separate page.)*



4. How would you approach constituent service for District 2? *(If more space is needed, please continue on a separate page.)*



5. How would you approach balancing City-wide needs with District-specific needs? (*If more space is needed, please continue on a separate page.*)

SECTION III: EDUCATION AND EMPLOYMENT HISTORY

Please include a brief background on your education and employment history. You may also attach a copy of your resume for this purpose.

I attest that the information in this application is true and complete to the best of my knowledge.

Signature _____

Printed Name_____

Date