



# City of Moreno Valley

## City Council Advisory Boards and Commissions

### Membership Application Form

For City Clerk's Use  
Stamp Date and Time Received

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City Council District: \_\_\_\_\_

How long have you resided in Moreno Valley? \_\_\_\_\_

#### CONFIDENTIAL INFORMATION

Home Phone No.: \_\_\_\_\_ CA I.D./Driver's License No.: \_\_\_\_\_

Preferred Phone No.: \_\_\_\_\_ Email Address: \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

#### ELIGIBILITY

Are you at least 18 years of age? Yes ☐ No ☐

Are you a registered voter of the City of Moreno Valley? Yes ☐ No ☐

Do you authorize the City to process a criminal background check? Yes ☐ No ☐

#### EMPLOYMENT

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Position: \_\_\_\_\_

#### VOLUNTEER SERVICE

Name of Organization: \_\_\_\_\_

Purpose: \_\_\_\_\_

Title: \_\_\_\_\_

Length of Time: \_\_\_\_\_

## BOARD OR COMMISSION INFORMATION

Board or Commission applying for\*:

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

\*If applying for the Accessibility Appeals Board, please indicate which position you are applying for:

- ☐ Physically Challenged Member      ☐ Member Experienced in Construction  
☐ Public Member

\*If applying for the Utilities Commission, please indicate which position you are applying for:

- ☐ Public Member      ☐ Customer of Moreno Valley Utility  
☐ Business Customer of Moreno Valley Utility

Do you currently serve on a City Board or Commission? Yes ☐ No ☐

A. If yes, please list: \_\_\_\_\_

Have you previously served on a City Board or Commission? Yes ☐ No ☐

A. If yes, please list: \_\_\_\_\_

Do you have any immediate family members serving on the city council or employed with the City of Moreno Valley? Yes ☐ No ☐

Can you attend evening meetings (6:00 pm – 9:00 pm) at least once or twice a month? Yes ☐ No ☐

Are there days you cannot attend evening meetings? Yes ☐ No ☐

A. If yes, please list: \_\_\_\_\_

List any education, training, or special skills you have which may be relevant or of particular benefit to this Board and/or Commission:

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## **ACKNOWLEDGEMENT**

I acknowledge that I was provided with the attached copy of Legislative Policy #1.10 (City Council Advisory Boards and Commissions) and offered an opportunity to ask questions regarding any of its provisions prior to submitting this application.

## **CERTIFICATION**

I certify that all statements in this application are true and complete to the best of my knowledge. I understand that any false statements of material fact will subject me to disqualification or dismissal if appointed.

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Print Name/Signature

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Date

All Applications shall be submitted to the City Clerk's office at Moreno Valley City Hall – located at 14177 Frederick St., Moreno Valley, CA 92553 – during regular office hours (7:30 a.m. to 5:30 p.m., Monday through Thursday, and 7:30 a.m. to 4:30 p.m. Friday). Alternatively, applications may be submitted by mail or electronically via the City Clerk's email [cityclerkstaff@moval.org](mailto:cityclerkstaff@moval.org).

## **Background Check Authorization**

As part of the application process for service on a City Advisory Board, a criminal background check will be conducted through the California Department of Justice. Please be advised that you will not be provided with a copy of the criminal background information received from the Department of Justice unless you are deemed ineligible due to a disqualifying criminal conviction.

**Attachment: Legislative Policy #1.10 – City Council Advisory Boards and Commissions**