

## **VISUAL ARTS COMMITTEE APPLICATION**

The Visual Arts Committee consists of seven (7) members who have a strong interest in and enthusiasm for the visual arts. Two (2) members should be recognized specialists in one or more aspects of the creation of art, the judgment of quality of art, or the placement of art. All applicants are strongly encouraged to review the webpage and current work plan of the Visual Arts Committee to understand the scope of work and expected commitment. For any questions about the Visual Arts Committee, please email vac@mountainview.gov. Meeting agendas can be found on the City's website. Meeting information can be found on the City's website. Members of boards, commissions, and committees shall serve on only one body at a time.

Name:			
	First	Last	
Resider	nce Address:	City:	Zip:
Resider	ntial Phone:	Business Phone:	
Email A	ddress: (if appointed, this will be on a public roste	er)	
Occupa	tion:	Present Employer:	
Employ	er Address:	City:	Zip:
Are you	a resident of the City of Mountain View?	Yes No	If yes, years as resident:
Are you	an employee of the City of Mountain View	w?  Yes  No	
Are you	registered to vote in the City of Mountair	n View? 🗌 Yes 📗 No	
•	aware of any person or professional confl that may be considered by the Committee	' '	cipating in discussion of any subject
	nts are strongly encouraged to attend at led a meeting?  Yes  No	east one meeting of the Committee	before applying. Have you already
Numbe	r of meetings attended:	Observed Only Participate	ed Previously Appointed
	provide your answers to the questions listended and submit your completed application to:	ed on the following page, read, sign, a	and date the agreement on the last
Email:	city.clerk@mountainview.gov		
Mail:	City Clerk's Office 500 Castro Street P.O. Box 7540		

Please fill out all information completely. Attach additional pages if needed.

Mountain View, CA 94039-7540

Visual Arts Committee Applicant Name:
Please share why you want to be appointed to the Visual Arts Committee.
Please list the community organizations in which you have participated and describe your participation and any officia role/position you may have held.
Please describe the qualifications or experience you possess (such as employment and/or education) that you feel would be an asset to the Visual Arts Committee.

Visual Arts Committee Applicant Name:			
GREEMENT—READ CAREFULLY BEFORE SIGNING			
hereby certify that all statements made in this application are true, and I authorize investigation of all information contained in this application. I acknowledge that any false statements or misrepresentation on this application will be grounds for disqualification.			
If I am appointed to serve on the Visual Arts Committee, I have sufficient time to devote to this responsibility, know the adopted meeting schedule, and plan to attend all meetings of the Committee. I understand it is required that all Committee members take an Oath of Office and sign the Code of Conduct prior to undertaking their duties. I also understand that I will be required to complete: (1) a Fair Political Practices Commission Statement of Economic Interests Form 700 upon assuming office, annually, and upon leaving office; (2) ethics training upon assuming office and every two years thereafter.			
ignature: Date:			
his application is subject to the California Public Records Act and will be disclosed upon request to the extent required y law. Applications not acted upon will expire after one year from the date submitted unless renewed by the applicant.			
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nterviewed: Renewed:			