

CITY OF ALAMEDA APPLICATION PENSION BOARD

Please note that persons APPOINTED to the Pension Board will be required to file Conflict of Interest Statement.

PLEASE CHECK WHICH SEAT(S) YOU ARE QUALIFIED FOR:

- Fire Department Representative Member-at-Large
 Police Department Representative

PLEASE PRINT THE FOLLOWING INFORMATION:

Name:

(Last)

(First)

(Middle Initial)

Address: _____

Home Telephone _____

Business Telephone _____

Email : _____

Occupation: _____

Employer: _____

Would decisions made by the Board conflict with your business or occupation?

Yes

No

If yes, please explain

List schools attended and degrees obtained

Qualifying
Education

List prior practical experience which would qualify you for the Board

Qualifying
Experience

Other
Comments

Applications are public information. Would you like your telephone numbers/address withheld?

Yes

No

Would you like your email address withheld?

Yes

No

Nominees are subject to background investigations. Do you agree to be subject to an investigation?

Yes

No

(Signature)

(Date)

File with the City Clerk, City Hall, 2263 Santa Clara Avenue, Room 380. You will be notified if appointed.
Applications are valid for one year.

Revised 3-2006