



APPLICATION DEADLINE: 4:30 p.m. Friday, April 17, 2020

APPLICATION FOR Antioch Representative

CONTRA COSTA COUNTY MOSQUITO & VECTOR CONTROL BOARD OF TRUSTEES

Print your name: _____

Address: _____ City: _____

ZIP Code: _____ Phone (H) _____ (W) _____ (C) _____

e-mail address: _____

Employer: _____

Address: _____ City: _____

Occupation: _____

Years lived in the City of Antioch: _____

List the three (3) main reasons for your interest in this appointment: _____

Have you attended any meeting of this board? _____

Have you had any previous city community service on this board? (If yes, please explain) _____

What skills/knowledge do you have that would be helpful in serving on the Contra Costa Mosquito & Vector Control District Board? _____

Please indicate any further information or comments you wish to make that would be helpful in reviewing your application.

Additional information about the Contra Costa Mosquito & Vector Control Board and its mission is available online at www.ContraCostaMosquito.com

The Board meets on the second Monday of every other month starting in January at 7:00 p.m. at the District's offices at 155 Mason Circle, Concord.

Can you attend meetings at the designated times?_____

PLEASE ATTACH YOUR RESUME *(REQUIRED TO BE CONSIDERED FOR APPOINTMENT)*.

PLEASE NOTE THIS COMPLETED APPLICATION IS AVAILABLE FOR PUBLIC REVIEW.

DELIVER OR MAIL TO: Antioch City Clerk
200 "H" Street
Antioch, CA 94509

Signature

Date