



APPLICATION FOR APPOINTMENT TO SENIOR ADVISORY COMMITTEE

Name _____

Address _____

Phone Number _____ Email _____

Occupation _____ Years lived in Newark _____ Age 55+ Yes No

Applicants must be Newark residents who are 55 years of age or older

Please provide the requested information below. If additional space is needed, attach additional pages

List any organizations, associations, or community groups you belong to (or write "N/A")

List any other City boards, commissions, or committees you would consider serving on (or write "N/A")

Please describe your interest in serving on the committee (or write "N/A")

Signature _____ Date _____

Return the completed form to the City Clerk at the address listed above or Email city.clerk@newarkca.gov