

Oversight Committees Application Form (For application to the Bond Measures & Parcel Tax Measures Oversight Committees)

QUALIFICATION STANDARD: To be a qualified person to serve on a committee you must be at least 18 years of age and reside within the District's geographic boundary, in accordance with Government Code Section 1020.

Geographic Boundaries: Alameda, Albany, Berkeley, Emeryville, Oakland or Piedmont

	Dhara	E	
name:	Phone:	Fax:	
Home Address:	Street	City	7:
			Zip
Email:			
EMPLOYMENT INFOR	MATION:		
Name of Employer:	Od	ecupation:	
Work Address:	No PO Boxes – Street Address only)	Work Phone:	
((No PO Boxes – Street Address only)		
COMMITTEE INTERES	ST: Check the committee(s) for whi	ch you are applying.	
☐ Bond Measures Oversi	ght Committee (see below) P	arcel Tax Measures Oversigh	nt Committee
If you are applying for the	Bond Measures Oversight Committee	ee please specify which posit	ion(s) you ar
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ADDITIONAL INFORMATION:

1.	Have you been a member of any community college or school district or school-based committee? Yes No			
If s	o, which one, and in what capacity?			
2.	Are you an employee of the Peralta Community College District? (NOTE: Employees of the District are prohibited from being members of either Committee.)			
3.	Have you ever been employed by the Peralta Community College District? ☐Yes ☐No			
4.	Are you a vendor, contractor, or consultant to the Peralta Community College District? (NOTE: Vendors, contractors and consultants of the District are prohibited from being members of either Committee.) Yes No			
5.	Are you able to complete at least one term (two years) as a member of a Committee and refrain from becoming an employee, vendor, contractor, or consultant of the Peralta Community College District during such time? Yes No			
List present or past membership in any community service, civic, or other pertinent organization. Please also list participation in seminars, workshops, volunteer work, professional organizations, etc.				
Ple	ase answer the following questions:			
 3. 	How long have you been a resident within the Peralta District?Years Do you have any children or grandchildren who now attend (or have attended) Peralta Community College District?Yes No Do you know of any reason, such as a potential conflict of interest, which would adversely affect your ability to serve on a Committee?Yes No List references that have knowledge of your character, experience, and abilities. Do not include names of relatives. (You may attach letters of reference from those listed if you wish.). Please provide Name/Address/Phone/Business/Occupation for each reference:			
5.	Explain why you would like to be appointed to a Committee.			
/= -				
(Y	ou may provide additional answers to the above question on separate sheets of paper.)			
CE	ERTIFICATE OF APPLICANT:			
All bel	answers and statements in this document are true and complete to the best of my knowledge and ief.			
	Signature Date			