



## COUNCIL ADVISORY GROUP PUBLIC ART COMMISSION APPLICATION

All members shall have specialized expertise or experience in the fields of visual arts, design, urban planning, or prior involvement in the City's community cultural planning process or local visual arts.

Deliver / Send Completed Form to:  
City Clerk's Office, 501 Poli Street – Room 204, P. O. Box 99, Ventura, CA, 93002-0099; or  
cityclerk@ci.ventura.ca.us

Name \_\_\_\_\_

Street Address/City/Zip \_\_\_\_\_

Mailing Address (If different) \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Fax Number (H) \_\_\_\_\_ (B) \_\_\_\_\_

Email Address (H) \_\_\_\_\_ (B) \_\_\_\_\_

Name of Employer \_\_\_\_\_

Address/City/Zip \_\_\_\_\_

Type of Business/Occupation \_\_\_\_\_

Resident of Ventura city limits since \_\_\_\_\_

**Public Art Commission has specific membership requirements: Please check all that apply (NOTE: recruitments may only need individuals with specific requirements.):**

1. I am a City Resident - Yes  No
2. I am the owner, operator or manager of a City licensed business enterprise - Yes  No
3. I am an arts education professional currently teaching in the City - Yes  No
4. I am a Architect, Landscape Architect, Urban Planner or similar professional - Yes  No
5. I am a Visual Artist, Public Artist, Curator/Gallery Director, Conservator, Collector or other art professional Yes  No
6. I have prior involvement in the City's community Cultural planning process or local visual arts  
Yes  No

Are you a registered City of Ventura voter? Yes  No

Have you or any of your relatives been employed or are presently employed by the City of Ventura?  
Yes  No

Have you or any of your relatives served or are presently serving on an advisory group of the City of Ventura? Yes  No

1. Describe what education, experience, training, license or professional registration, and public service qualifies you to serve on the advisory group you have selected: **(RESUME MUST BE ATTACHED)**

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**LICENSE NO.** \_\_\_\_\_

2. Describe other experience working in a group, receiving information, and arriving at consensus decisions.

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3. I want to be appointed because:

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4. Have you ever been convicted of a felony or a misdemeanor that resulted in jail or probation? Yes  No  Please do not list convictions pursuant to Health & Safety Code Sections 11357(b) or (c), 11360 (b) or (c), 11364, 11365, or 11550 as related to marijuana offenses. If yes, give the following information for each offense: Date, Charge, Place, Court, and Action Taken. You may omit any offense committed before your 18<sup>th</sup> birthday that was finally adjudicated in a juvenile court or under a Youth Offender Law. A conviction will not necessarily disqualify you from appointment.

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5. Please list two references (Name, address, phone):

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If appointed, I understand I will be responsible for filing Statements of Economic Interests and fulfilling ethics training, and failure to do so in a timely manner may be cause for termination of position. This application is a public documents and available for review.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

In compliance with the Americans with Disabilities Act, this document is available in alternate formats by calling the Ventura City Clerk's Office at 658-4787 or contacting the California Relay Service.

<b>FOR OFFICE USE ONLY</b>	
Incumbent: _____	Form 700: _____
Date Interviewed: _____	Ethics: _____
Appointed: _____	