



## INSTRUCTIONS TO COMPLETE THE CITY OF SAN JUAN CAPISTRANO APPLICATION

---

1. Use the tab key to navigate through the form.
2. Use the space bar or the mouse to check appropriate boxes.
3. If the information you are entering does not fit, abbreviate or use a separate sheet of paper.
4. Print all pages
5. Sign the application in ink.
6. Mail to: **City of San Juan Capistrano  
Office of the City Clerk  
32400 Paseo Adelanto  
San Juan Capistrano, CA 92675**
  - Application must be received by the City Clerk by 5:30 p.m. on the closing date. **Faxed applications will be accepted. (949) 493-1053** (Please mail the original, signed application after sending via fax)
  - A separate application must be filled out for each position that you are applying for.
  - You are encouraged to attach a resume or other biographical information.

## Application for Youth Advisory Board YOUTH MEMBER



City of San Juan Capistrano  
Office of the City Clerk  
32400 Paseo Adelanto  
San Juan Capistrano, CA 92675  
(949) 493-6322

Thank you for your interest in serving the City of San Juan Capistrano. Members of all commissions, committees, and board are also subject to City Council policies related to meeting conduct and attendance, among other policies.

Last Name:	First Name:	M.I.	Primary E-Mail Address:	
Address:			Home Phone:	
City:	State:	Zip Code:	Alternate Phone:	
School & Grade in Fall:				
Please list your school extracurricular activities, year of involvement, and any offices you held:				
Please list any community service that you are or were involved in – include duration of service and organization served:				

What skills or interests do you have that will benefit the Youth Advisory Board and the community's youth?  
Why do you want to serve on the Youth Advisory Board?

What do you believe are the duties of the Youth Advisory Board?

Although a conviction record will not necessarily be a bar to appointment, have you ever been convicted, imprisoned, or placed on probation for an offense other than a traffic citation or traffic misdemeanor?

Yes                      No

Can you perform all of the duties that are required for the appointment?      Yes      No (If No, please state details on a separate sheet and describe accommodations necessary.

Please use this space to provide any additional information you feel is pertinent to your qualifications for an appointment.

**PLEASE READ CAREFULLY BEFORE SIGNING**

"I certify that all statements made in this application and attachments are true and complete to the best of my knowledge. I authorize the City of San Juan Capistrano to make investigations and inquiries that are limited to the requirements for this position. I understand that any false or misleading information given in my application or any step in the employment selection process will subject me to disqualification or dismissal." I hereby release employers, schools, or persons from any liability in responding to inquiries in connection with my application. I understand that any false or misleading information given in my application will subject me to disqualification or dismissal. I understand also, that I am required to abide by all rules and regulations of the City of San Juan Capistrano.

Signature \_\_\_\_\_ Date: \_\_\_\_\_