

HOLLISTER AIRPORT ADVISORY COMMISSION
Application for Commissioner

Name: _____
Address: _____
Phone: _____
Email: _____ Cell Phone: _____
Employer: _____ Work Phone: _____

NOTE: The information you provide is done with the express understanding that it is public information and may be provided to the public when requested.

College: _____

Community Service Experience including service on other Boards, Commissions, Clubs, and/or Organizations

Clubs or Organizations: _____

Aviation or Municipal Experience: _____

Why do you wish to be on the Airport Advisory Commission and what contributions can you make to the Airport Advisory Commission? (Attach additional sheet if necessary.)

Date: _____ Signature: _____

Attach resume if desired.

When completed please return to the City Clerk's Office at 375 Fifth Street, or
Email to: cityclerk@hollister.ca.gov