## **Board Membership Application**

Central Core Restoration Corporation 301 Georgia St. Suite 290, Vallejo CA 94590 Telephone (707) 557-6762 Fax (707) 557-6040 ccrcvallejo@gmail.com

Thank you for your interest in serving on the board of CCRC. The board consists of 11 members comprised of DISTRICT property owners or their representatives, and a maximum of 2 at-large members. THIS APPLICATION CAN BE RETURNED BY EMAIL, MAIL, FAX, OR IN PERSON.

APPLICANT INFORMATION					
Name:					
	Last	First			
Home Address:					
	House #, Street, City, State and Zip				
Mailing Address (if different from above)					
	House #, Street, City, State and Zip				
Daytime phone:	Mobil	e:	Fax:		
Email:					
Employment Check any applicable	employed Self-employe	ed not emplo	yed retired		
Employer					
PROPERTY RELATED					
I am applying as (check only one):					
Property Owner					
	CCRC District Property Address				
Representative					
Representative	CCRC District Property Address		Property Owner Name		
At-Large					
Business Owner or Other, Please Specify					
	AREAS	OF INTEREST			
If elected, in which of the following areas would you prefer to be involved?					
Check any applicable	☐ Budget/Finance	☐ Economic			
Company of the Compan	Development  Beautification-Cleanliness	☐Public Safety			
1	Promotion	Advocacy			

	PERSONAL STATEMENT			
Please state why you would be a Board of CCRC? Include any relevant	good community board member. What do you specifically ant skills and interests	y feel you can contribute to the		
	PAST EXPERIENCE			
Please list any organizations, co	ommissions, boards or committees you have served on, ar	nd the positions held in each.		
	CURRENT AFFILIATIONS			
	CURRENT AFFILIATIONS			
Civic and community organizations, religious institutions, neighborhood associations and any other groups. Please note if you hold an executive position, including Board of Directors.				
	REFERENCES			
Please provide two references such	as supervisor, colleague, or current community board member. F	Please do not list family members.		
Full Name	F	Phone		
Full Name	F	Phone		
Applicant Signature		Date		
Property Owner/ Agent Signature if different from applicant		Date		
☐ I agree to contribute 6-8 ho	ours per month to CCRC			