



# MISSION TRAILS REGIONAL PARK CITIZENS' ADVISORY COMMITTEE APPLICATION

## CITY OF EL CAJON

**Please submit the signed application by e-mail, mail, or in person.**

**Drop off or mail to:** City Clerk's Office, 200 Civic Center Way,  
El Cajon, CA 92020

**Email:** [acortez@elcajon.gov](mailto:acortez@elcajon.gov)

**NOTE:** *Once a public service application is filed with the City, it becomes a public record.*

### **General Information:**

**Term of Office & Position Type:** The term of office & position type are to be determined.

**Selection Process:** The City Council will consider applications received and interviews will be scheduled accordingly.

**Applications are accepted on an ongoing basis.** Your application will remain on file until an open seat/position is available, at which point you will be contacted with information regarding the interview process.



## MISSION TRAILS REGIONAL PARK CITIZENS' ADVISORY COMMITTEE PUBLIC SERVICE APPLICATION

### Eligibility:

The Mission Trails Regional Park is under the jurisdiction of the City of San Diego. There are nine (9) affected major community planning areas bordering the park, including the City of El Cajon. The Mission Trails Regional Park Citizen Advisory Committee was established to allow representation by each of these agencies as a means for arriving at consensus recommendations impacting the park and the surrounding agencies.

Requirements to serve on the Mission Trails Regional Park Citizen Advisory Committee include:

- Reside in the city limits of El Cajon;
- General knowledge of parks is desired;
- Interest in the use and maintenance of Mission Trails Park;
- Ability to work with other committee members, the general public, and park affiliated agencies

How long have you lived in El Cajon? \_\_\_\_\_

How long have you lived in San Diego County? \_\_\_\_\_

### Applicant Information:

Full Name:

\_\_\_\_\_

Full Address:

\_\_\_\_\_  
*Street Number and Name*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*ZIP Code*

\_\_\_\_\_  
Phone:

\_\_\_\_\_  
Email:

Supplemental Questionnaire:

Explain your interest in this position.

Have you ever been disciplined or cited for breach of ethics or unprofessional conduct or been the subject of a complaint to any court, administrative agency, professional association, disciplinary committee, or other professional group? If yes, please explain.

To the best of your knowledge, are you currently under federal, state, or local investigation for possible violation of a criminal law or ordinance? If yes, please explain.

Please list three references who can speak to your work experience, character, or acts of service. Please provide their best contact information.

Are you related to an employee of the City of El Cajon?

Yes     No

Education & Experience:

Please list education, training, or special qualifications that you believe best qualifies you for this position.

Please list membership in service or community organizations or volunteer work that might be relevant to this position.

*(Remainder of this page intentionally left blank.)*

Employment (current to past):

Employer Name

Job Title

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*Dates of Employment*

From

To

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List the duties performed:

Employer Name

Job Title

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*Dates of Employment*

From

To

---

List the duties performed:

Employer Name

Job Title

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*Dates of Employment*

From

To

---

List the duties performed:

*By signing below, I certify that the information provided on this application is true and correct to the best of my knowledge.*

Signature

Date