



**SOLANO COMMUNITY COLLEGE DISTRICT  
MEASURE Q CITIZENS' BOND OVERSIGHT COMMITTEE  
(CBOC)**

***Application/Nomination Form***

This form and the application materials outlined by it are to be used by individual applicants or to nominate an individual or an organization. This document is a public record, a copy of which will be released to any member of the public upon request. Please complete the information below and return to the Business Operations Coordinator, Bond, 4000 Suisun Valley Road, Fairfield, CA 94534.

**SECTION 1**

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City & Zip Code \_\_\_\_\_

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

Fax Number \_\_\_\_\_ Email Address \_\_\_\_\_

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**SECTION 2**

1. I understand that I may not be employed by the District and serve on this committee  
 Yes  No
2. I understand that I may not be a vendor, contractor, or consultant to the District and serve on this committee.  
 Yes  No
3. Select the public interest category(ies) that the application or nominees represent(s)
  - \_\_\_ Business
  - \_\_\_ Senior Citizens' Organization
  - \_\_\_ Bona Fide Taxpayers' Organization
  - \_\_\_ SCC Student active in student government or other college activities
  - \_\_\_ College Foundation member or College Advisory Committee member
  - \_\_\_ Construction/trade industry
  - \_\_\_ Other
    - \_\_\_ Occupational Advisor – VTEA
    - \_\_\_ Civic Organization
    - \_\_\_ Professional Organization
    - \_\_\_ Other as stated in accompanying materials

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**SECTION 3**

Provide the following materials as attachments to this form.

- \_\_\_ Resume or vita
- \_\_\_ Statement of what the applicant/nominee expects to contribute if appointed (no more than one page)
- \_\_\_ Name, address, and phone number of three personal and/or professional references

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**SECTION 4**

*I certify that answers and statements required in this application process are true and complete to the best of my knowledge and belief.*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_