

APPLICATION FOR APPOINTMENT TO THE INDEPENDENT DISTRICTING ADVISORY COMMISSION

CITY OF MERCED
JAN29'15PH4:40

SUBMIT BY EMAIL

PLEASE RETURN THE COMPLETED APPLICATION TO THE CITY CLERK'S OFFICE, OR BY MAIL: CITY CLERK'S OFFICE 678 W. 18TH STREET, MERCED, 95340

Rabon	Tina		M
LAST NAME	FIRST NAME		M.I.
	95341		
HOME ADDRESS	ZIP		PHONE
Central Valley Trainin	ng Center Instructor 2		
EMPLOYER	JOB TITLE		EMAIL ADDRESS
	95341		
BUSINESS ADDRESS	ZIP		BUSINESS PHONE
LENGTH OF RESIDENCE IN CITY OF MERCED	ARE YOU A REGISTERED VOTER OF THE CITY OF MERCED?	IF YOU ARE NOT A REGISTERED VOTER, ARE YOU ELIGIBLE TO VOTE?	DO YOU HAVE ADEQUATE TIME TO SERVE?
13 YRS 6 MTHS	YES NO	O YES O NO	YES ONO
HY DO YOU WANT TO SE	ERVE ON THE MEASURE "T"	DISTRICTING COMMISSION:	:
I feel that it's importa	nt that different areas of M	lerced have a voice and a	representative.
HAT DO YOU SEE AS YO	UR ROLE ON THE COMMISS	sion:	
•	I would like to have a hand dhered to, so everyone ha		uidelines to drawing
EASE LIST YOUR EDUCA	TIONAL BACKGROUND:		
	Graduate with a few college ctiveness Training, Behav		s Intervention,

Engagement ed County, er for Merced Sundlass Hut.
SHIPS:

THANK YOU FOR YOUR INTEREST IN THE CITY OF MERCED



APPLICATION FOR APPOINTMENT TO CITY OF MERCED THE INDEPENDENT DISTRICTING ADVISORY FEB 15 MILES FEB 15 MILES

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678 W. 18TH STREET,	MERCED, 95340	,	
Sanchez	T _{Sa}	bel	
LAST NAME	FIRST NAME		NA I
_	9534	95341	
HOME ADDRESS	ZIP		
EMPLOYER	JOB TITLE		EMAIL ADDRESS
Retired			
BUSINESS ADDRESS	ZIP		BUSINESS PHONE
LENGTH OF RESIDENCE IN CITY OF MERCED	ARE YOU A REGISTERED VOTER OF THE CITY OF MERCED?	IF YOU ARE NOT A REGISTERED VOTER, ARE YOU ELIGIBLE TO VOTE?	DO YOU HAVE ADEQUATE TIME TO SERVE?
76 YRS 4 MTHS	YES O NO	O YES O NO	YES O NO
HY DO YOU WANT TO S	ERVE ON THE MEASURE "T"	DISTRICTING COMMISSION:	
Provide represen Merced	assistance an tation of and not just mil	d suggestions all the comm	to have fair
HAT DO YOU SEE AS YO	OUR ROLE ON THE COMMISS	ION:	
I can reside	provide Kno nt of Merced	wledge as a	native
EASE LIST YOUR EDUCA	ATIONAL BACKGROUND:		
Merced H	tigh dipolma		
	pop classes in	Fordy Childrend	

PLEASE LIST YOUR WORK EXPERIENCE:
Farmer's Ins. 74rs Merced City Schools 234rs
PLEASE LIST ANY PROFESSIONAL, TECHNICAL, OR COMMUNITY ORGANIZATION MEMBERSHIPS:
NEIGHBORS UNITED FOR BETTER SOUTH MERCED SACRED HEART ALTARSOCITY MERCED HAVING WORK WITH SOUTH SIDE RESIDENT WITH CAL-TRAN TO INSTALL TRAFFIC LIGHTS AND CROSS WALK
PLEASE LIST ANY CIVIC OR COMMUNITY EXPERIENCE INCLUDING PREVIOUS PUBLIC SERVICE APPOINTMENTS:
Ad-HOC CITIZENS Advisory COMINITEE FOR THE MARTIN LUTHER KING JR. WAY REVITALIZATION Plan CITIZENS OVERSIGHT COMMITTEE MEASURE C
HOW DID YOU LEARN ABOUT THE MEASURE "T" COMMISSION VACANCIES?
Newspaper Utility Bill Insert Website Other Golden Valley Center (HEALTH) 2nd Floor 857-W. CHILDS Ave
ETHNIC BACKGROUND:
Choose the one (ONLY ONE) ethnic group with which you most closely identify yourself:
 American Indian or Alaskan Native Black Hispanic White Asian or Pacific Islander Other Mexican American

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