

Profile

Charles

First Name

W

Middle Initial

Reyburn

Last Name

MCOE Head Start

Employer

Cook

Job Title


Email Address


Primary Phone


Alternate Phone


Street Address


City


Suite or Apt


State


Postal Code

39

Number of Years Living in Merced:

Are you 18 years of age or older?

☒ Yes ☐ No

Are you a registered voter in the City of Merced?

☒ Yes ☐ No

Measure C

Are you currently serving on a Board or Commission? If so, please list:

Which Boards would you like to apply for?

Citizens Oversight Committee - Measure C

Question applies to multiple boards.

Highest Level of Education Completed: *

☒ Some College, No Degree

Communication

The City of Merced uses email as a preferred method of communication regarding your application. Is this acceptable to you?

☒ Yes ☐ No

If you selected no, please identify how you would like to be contacted:

Interests & Experiences

Tell us about yourself, and why you are applying for this particular Board or Commission:

To be actively involved with my city

Please list your current employer and relevant volunteer experience.

MCOE- Head Start

What is your understanding of the roles and responsibilities of this Board or Commission?

To oversee spending of Measure C dollars and to advise city council on new ideas and/or policy's that better help Merced.

Do you have experience or special knowledge pertaining to this Board or Commission?

I am already a sitting member

Any other comments you would like to add that may assist the City Council in their decision?

Upload a Resume

Requirements

Question applies to multiple boards.

AB 1234 Ethics Training

☒ I Agree *

Question applies to multiple boards.

Attendance Policy

☒ I Agree *

Statement of Economic Interests - FPPC Form 700

☒ I Agree *

Question applies to multiple boards.

Oath of Office

☒ I Agree *

Question applies to multiple boards.

Public Scrutiny

☒ I Agree *

How did you hear about this vacancy? *

☒ Other

Self

If you selected other, please indicate how you learned about the vacancy:

Demographics

Other

Ethnicity

Male

Gender



Date of Birth

Submission

CWR

I declare under penalty of disqualification or termination that all statements in this application are true and complete to the best of my knowledge.