



CITY OF YUCAIPA
34272 YUCAIPA BOULEVARD
YUCAIPA, CA 92399
(909) 797-2489

RECEIVED	
Date:	_____
By:	_____
	(Name)

CITIZEN SERVICE APPLICATION

The Yucaipa City Council is seeking citizens to serve on duly constituted City Commissions and Committees which have been established to assist and advise the City Council on specific matters for consideration which have been assigned to the respective Commission or Committee. Please complete this application for appointment in full. The applications should be typed or clearly printed and filed with the City Clerk.

Name of Applicant: Kristine Kokkos Mohler
First Middle Last

Address: _____
Number and Street City Zip Code

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email: _____

Occupation: P.E. Teacher

Educational Background: B.S. U.C. Davis

Commission or Committee for which you are applying: TRAILS & Open Space Committee

Why are you interested in this position?
I love our TRAILS & Open Space and have worked & volunteered to help maintain them for all to enjoy.

What do you consider to be three (3) major assets that would qualify you for selection to this commission/committee?

- I have been on this committee for several years
- I am an active equestrian who uses our trails
- I have time and energy to volunteer towards improving our TRAIL system.

ATTACH A RESUME AND/OR ADDITIONAL INFORMATION WHICH YOU FEEL WILL ASSIST THE CITY COUNCIL IN THEIR SELECTION.

CITIZEN SERVICE APPLICATION
PAGE TWO

How long have you resided in Yucaipa? 25 plus years
Are you a registered voter? YES NO

REFERENCES:

- Dick Riddell, Denise Hoyt, Greg Bugh
- Bobbie Duncan, David Avila

Applicants are advised that they may be requested to make information available regarding any potential conflict of interest arising from their business/property and/or investments with the City of Yucaipa or where the decisions taken by the City of Yucaipa may influence that business or affiliation.

Completed applications should be returned to the City Clerk's Office, 34272 Yucaipa Boulevard, Yucaipa, California 92399, prior to any closing dates established.

I CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT.

Signature of Applicant: [Handwritten Signature] Date: 11-1-16

For Office Use Only	
Appointed to:	_____
Appointed by:	_____
Date Appointed:	_____
Termination of Appointment:	_____