



**APPLICATION FOR ALTERNATE PUBLIC MEMBER  
LOCAL AGENCY FORMATION COMMISSION FOR THE COUNTY OF LOS ANGELES (LAFCO)**

Prospective applicants must be a resident of Los Angeles County. No Public Member or Alternate Public Member shall be an officer or employee of the County of Los Angeles or serve on any city or special district within the territory of the County of Los Angeles. This restriction applies at the time of appointment, meaning that applicants whose application indicates an intent to resign or retire prior to final appointment from any prohibited office, employment, or appointment may still be considered by the Commission.

**Applications must be submitted to LAFCO no later than  
Monday, March 13, 2023, at 5:00 p.m.**

Name:

Address:

Telephone:

E-mail:

Current Occupation:

Date : From/To

Employer:



Qualifications:

How did you hear about us?

Why do you wish to serve on LAFCO?

Are you available to attend monthly meetings generally scheduled on the second Wednesday of the month at 9:00 a.m. in downtown Los Angeles?

YES                      NO

Have you attended LAFCO meetings?

YES                      NO

Are you a resident of Los Angeles County?

YES                      NO



Are you an officer, employee, or appointee to a commission/board of the County of Los Angeles or any city or special district (an agency of the state, formed pursuant to general law or special act, for the local performance of government or proprietary functions within limited boundaries) with territory in the County?

YES

NO

If yes, name agency:

If selected by the Commission, would you be willing to resign or retire from your office, employment, or appointment by the County, city, or special district prior to your selection as the Alternate Public Member?

YES

NO

If you need additional space, please attach extra sheets.

CONSENT ANND CERTIFICATION

Please check the following boxes and sign and date the application below.

*I have reviewed the description of qualifications and duties for the position and am able to perform all duties and am willing to serve the Commission as an Alternate Public Member.*

*I understand that if appointed to Los Angeles LAFCO I will be required to comply with FPPC disclosure regulations and file annual statements of financial interests.*

*I certify that the information contained in this application is true and correct. I authorize the verification of the information in this application.*

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_