

**APPLICATION FOR CSL CANDIDACY**

PSA \_\_\_\_\_\_ Incumbent \_\_\_ New Candidate \_\_\_

Name of Candidate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Telephone(s) (Home)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(CP) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My State Senator is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District # \_\_\_\_\_\_

My State Assembly member is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District # \_\_\_\_\_\_

My Congressional Representative is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District # \_\_\_\_\_\_

For the Office of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ I certify that

(Senior Senator/Senior Assemblymember)

* I am 55 years of age on election day,
  + - * I am a registered voter
      * I reside in the Planning and Service Area (PSA) for which the election is held,

I own a functioning computer and a printer. (Note: Ideally, the printer would be an all in one printer, fax, copier and scanner.)

* + - * I have a personal email account and basic access to and knowledge of how to

use email, transmit documents, and open MSOffice and PDF documents,

I possess the ability to take top senior concerns/issues at local level and draft them

into a legislative proposal following a template.

I have the ability to navigate the Capitol Building in Sacramento as well as my local

community.

I can commute to and from the Capitol Building in the same day.

I agree that all decisions regarding my candidacy, election and/or recall are the responsibility of the CSL JRC and are final and binding.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Signed \_\_\_\_\_\_\_\_\_\_

Attach the following documents to this application:

* + - * Resume outlining broad base of experience at the city and county levels on issues

dealing with seniors

* + - * Signed Code of Ethics
      * Signed Volunteer Agreement and Waiver
      * Signed Statement of Commitment

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