

Senior Advisory Committee (SAC)
Application for Membership

Name _____

Address _____

Preferred method of contact:

Telephone _____

Email _____

What is your experience in working with senior programs and services?

What is your experience participating and working on committees and/or boards?

What accomplishment(s) in your life are you most proud of completing?

Why are you interested in working on the City of Watsonville's Senior Advisory Committee?

What do you consider the greatest strengths that you would bring to SAC?

Is there anything else we should be aware of?

Expectations of SAC members:

Two-year commitment recommended

Monthly meetings

Commitment to one project/goal/committee (1-2 hours a month)

Signature

Date