



CITY OF SAN RAMON
Application to serve on the
SENIOR CITIZEN ADVISORY COMMITTEE

Members must be at least 55 years or older

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1. Name: _____
 2. Address: _____
 3. Telephone: Home: _____ Business: _____ Email: _____
 4. Occupation _____
 5. Education: _____
 6. Job or community experience:

 7. What is your knowledge or experience in issues related to senior citizens?

 8. What do you consider the most critical issue facing senior citizens in San Ramon?

 9. Are you aware of senior citizen programs available through the County or the City?

 10. What do you feel is the most important contribution you can make as a Committee member?

 11. Other information:
 - a. Are you at least 55 and reside within San Ramon City limits? _____
 - b. Are you able to attend day meetings? _____
 - c. How long have you lived in the San Ramon? _____
 12. Are you familiar with the San Ramon Senior Center programs, services and activities?

 13. What do you feel are the trends for Seniors and for the Senior Center over the next ten years?

 14. What do you perceive as the role of the Senior Citizen Advisory Committee?

 15. Any other information or comments?

Signature: _____ Dated: _____

RETURN APPLICATION TO: cityclerk@sanramon.ca.gov
CITY CLERK - CITY OF SAN RAMON - 7000 BOLLINGER CANYON RD - SAN RAMON, CA 94583
PHONE: (925) 973-2539 FAX: (925) 275-0650
