

SUPERIOR COURT OF CALIFORNIA, COUNTY OF NAPA
Court Executive Office

825 Brown Street
Napa, CA 94559
(707) 299-1110

JUVENILE JUSTICE COMMISSION APPLICATION

Adult application **Youth application**

*Please print or type. If additional space is needed to provide requested information,
please attach additional sheets*

Full name: _____

Home address: _____

Home telephone: _____ E-mail address: _____

Office address: _____

Office telephone: _____ Office fax number: _____

Current occupation (*within last 12 months*): _____

Business/community interests (*within last 12 months*): _____

Current license(s) (*professional/occupational*): _____

Date of issue and/or expiration status: _____

Educational/Experience *(a resume may be attached containing this and any other information that would be helpful to the Commission in evaluating your application)*: _____

Community participation *(nature of activity and community location)*: _____

Other County boards/commissions/committees on which you have served: _____

Names, addresses, and telephone numbers of three individuals familiar with your background: _____

Adult applicant only: for conflict of interest purposes – if married, spouse’s name and occupation within the last 12 months: _____

Youth applicant only: for conflict of interest purposes – name of mother and father and their occupation within the last 12 months: _____

Please explain your reasons for wishing to serve on the commission, and how you feel you could contribute: _____

Date: _____

(Signature)

PLEASE RETURN COMPLETED APPLICATION BY HAND DELIVERY OR MAIL TO:

COURT EXECUTIVE OFFICE
NAPA SUPERIOR COURT
825 BROWN STREET
NAPA CA 94559

OR BY FACSIMILE TO:

(707) 299-1250