

CITY OF SAN PABLO

APPLICANT QUESTIONNAIRE FOR COMMISSIONS, COMMITTEES AND BOARDS

"Please note that this form is a public record that may be subject to disclosure upon request."

NOTE: PLEASE FILL OUT SEPARATE APPLICATION FOR EACH BOARD/COMMISSION YOU WISH TO SERVE ON (TYPE or PRINT ONLY)

When Completed Return To: City Clerk's Dept., City Hall, Building 1, 13831 San Pablo Avenue, San Pablo, CA 94806; Telephone 510.215.3000

INDICATE YOUR PREFERENCE

NAME: Genoveva Calloway

ADDRESS [REDACTED] CITY/ZIP San Pablo

HOME PHONE NO. [REDACTED] WORK PHONE NO. none

EMAIL ADDRESS [REDACTED]

LENGTH OF RESIDENCE IN SAN PABLO 40 years IN CONTRA COSTA COUNTY 40 years

EMPLOYED BY Retired now- Contra Costa County LENGTH OF TIME 6 years

ADDRESS [REDACTED] CITY/ZIP [REDACTED]

EXPERIENCE RELATING TO THIS POSITION My experience on the Ed Fund Board of Directors

and my experience as a San Pablo Council Member

In both settings, grants were issued to non-profits,

teachers and scholarships to WCCUSD Senior

students

SOME THOUGHTS YOU BELIEVE MAY CONTRIBUTE TO IMPROVE BOARD/COMMISSION:

Determine top priorities in City and compliment/enhance applicant's other funding

sources to maximize impact of funding.

IF APPOINTED, WHAT DO YOU BELIEVE YOUR RESPONSIBILITIES OR DUTIES WOULD BE?

To work with entire Board to select agencies to fund in providing services in San

REFERENCES (TWO) (OTHER THAN FAMILY MEMBERS): **Pablo**

NAME **Cecilia Valdez** ADDRESS **Abella Development**

NAME **Wendy Gonzales** ADDRESS **Principal at Ford**

DATE **12-18-19** APPLICANT'S SIGNATURE Genoveva Calloway

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* INTERVIEW NOT REQUIRED

**SIMULTANEOUS SERVICE ON PLANNING COMMISSION AND SAFETY COMMISSION PROHIBITED PER RESOLUTION 92-44