



CITY OF SOUTH EL MONTE

1415 N. SANTA ANITA AVENUE
SOUTH EL MONTE, CALIFORNIA 91733
(626) 579-6540 • FAX (626) 579-2107



APPLICATIONS TO SERVE ON THE CITY COMMISSION

COMMUNITY SERVICES COMMISSION - YOUTH REPRESENTATIVE

Notice is hereby given that the City of South El Monte is accepting applications from students interested in serving on the Community Services Commission. The term of office shall be for one year.

In order to qualify for consideration you must be a South El Monte resident and submit both a commissioner and live scan application.

Commissioner and live scan applications may be obtained Monday through Thursday at the Reception Desk, City Hall, 1415 N. Santa Anita Avenue, South El Monte or on the city's website www.cityofsouthelmonte.org. The deadline for accepting applications is Monday, February 5, 2018 by 5:00 p.m.

For further information, please contact the City Clerk's office at (626) 579-6540, Ext. 3280.



CITY OF SOUTH EL MONTE APPLICATION FOR APPOINTMENT TO COMMISSION

The City of South El Monte welcomes your interest to serve on a City Commission. All applicants must be residents of the City of South El Monte and be fingerprinted via Live Scan Service. City of South El Monte employees are not eligible to serve as a member of a commission.

Commission to which appointment is sought: **Community Services – Youth Representative**

PERSONAL INFORMATION *Please print the following information*

Name: _____

Address: _____

Years in South El Monte: _____ E-mail Address: _____

Home Phone: _____ Cell Phone: _____

EDUCATION

Grammar School

Name/Location Highest Grade Completed

High School

Name/Location Highest Grade Completed

LIST ANY CLUBS, GROUPS OR ORGANIZATIONS YOU BELONG TO:

OFFICES HELD OR LEADERSHIP ROLES:

Live Scan

Live Scan fingerprinting is the technique and technology used to capture fingerprints electronically. It replaces the more traditional method of ink and paper. The fingerprints are electronically transmitted to the Department of Justice (DOJ) for a criminal record background check.

Please bring the items listed below to your Live Scan Session:

- The completed "Request for Live Scan Service" form.
- A valid government-issued photo ID, such as a driver's license or passport.
- Payment for the Live Scan service. (Reimbursement will be provided by the City of South El Monte upon proof of payment.)

Location	Hours	Rolling Fee (Fingerprinting)	Form of Payment Accepted
(El Monte – Y43) Inter-Continental 10931 Valley Boulevard El Monte, CA 91731 (626) 454-1112	Monday – Friday 9:00 a.m. – 6:00 p.m. Closed for lunch from 1:00 p.m. to 2:00 p.m.	\$20	Cash & *Credit Cards *Credit Card Processing Fee Will Apply.



REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

A6000

ORI (Code assigned by DOJ)

CITY COMMISSIONER

Authorized Applicant Type

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

CITY OF SOUTH EL MONTE

Agency Authorized to Receive Criminal Record Information

1415 N. SANTA ANITA AVENUE

Street Address or P.O. Box

SOUTH EL MONTE

City

CA

State

91733

ZIP Code

03085

Mail Code (five-digit code assigned by DOJ)

JENNIFER E. VASQUEZ

Contact Name (mandatory for all school submissions)

(626) 579-6540

Contact Telephone Number

Applicant Information:

Last Name

Other Name

(AKA or Alias) Last

Date of Birth

Sex

Male

Female

Height

Weight

Eye Color

Hair Color

Place of Birth (State or Country)

Social Security Number

Home

Address Street Address or P.O. Box

First Name

Middle Initial

Suffix

First

Suffix

Driver's License Number

Billing Number

146086

(Agency Billing Number)

Misc.

Number

(Other Identification Number)

City

State

ZIP Code

Your Number:

OCA Number (Agency Identifying Number)

Level of Service:

DOJ

FBI

If re-submission, list original ATI number:

(Must provide proof of rejection)

Original ATI Number

Employer (Additional response for agencies specified by statute):

Employer Name

Street Address or P.O. Box

City

State

ZIP Code

Mail Code (five digit code assigned by DOJ)

Telephone Number (optional)

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed