CITY MANAGER'S REPORT JUNE 11, 2018 CITY COUNCIL REGULAR MEETING

ITEM:

MAYOR'S REFERRAL

RECOMMENDATION:

APPOINTMENT OF TWO (2) PLANNING COMMISSION

MEMBERS WITH TERMS EXPIRING JUNE 30, 2022

PLANNING COMMISSION - LMC Chapter 2.12:

Exiting Commissioner(s)	Date of Appointment	Reappointment Date	Term Expiration Date
Diane Lazard	03/21/16	^ n/a	06/30/18
Jennifer Torres- O'Callaghan	07/10/14	n/a	06/30/18

APPLICANTS FOR CONSIDERATION:

- 1. Christopher Mateo
- 2. Irene Espinoza
- 3. Jennifer D. Torres O'Callaghan
- 4. Diane Lazard
- 5. Diana Radonic, MBA
- 6. Ajit Singh Sandhu



COMMISSION/COMMITTEE APPLICATION RECEIVED

Applying for: Planning Commisioner

MAR 12 2010

CITY CLERK

Special Requirements:

Youth Advisory Commission: Must be a Lathrop resident between 13 to 18 years of age to serve on this commission Senior Advisory Commission: Must be 50 years of age or over and a registered voter to serve on this commission.

Planning and Parks & Recreation Commissions: Must be a Lathrop resident and a registered voter to serve on this commission.

Name: Christopher Mateo	J			
Address	City: Lathrop	Zip: 95330		
Telephone (home	Telephone (work)			
Telephone (cell)	Telephone (other)			
Email	Resident of the City of	Lathrop: 10 years		
Do you have Transportation to attend th	ne Commission meetings and Functions? Y	es⊠ No□		
Background Information:				
Are you related to a current City Emplo	yee? No			
If yes, give name and relationship	ip			
Employment/Volunteer Information:				
Councilmember				
Organization	` Date			
City of Lathrop		2008-2012		
Location	Position	n(s)		
Responsibilities/accomplishments:				
Organization	Date			
Location	Position	n(s)		
Responsibilities/accomplishments:				

Name of Organization	Position/Responsibilities	Dates	
Name of Organization	Position/Responsibilities/Accomplishments	Dates	
Special Awards or Reco	gnitions you have received:		
Educational Information	1:		
San Jose State University	BS	Economics	1987
Educational Institution	D /D: 1		. Year
Eaucationai Institution	Degree/Diploma	Field	. 1007
Educational Institution	Degree/Diploma	Field	Year
Educational Institution . Additional Information		Field	Year
Educational Institution . Additional Information	Degree/Diploma	Field	Year
Educational Institution Additional Information reviewing you application.)	Degree/Diploma (Please provide any other information which grant and submit to the Office of the of	Field you feel would be usef he City Clerk at the	Year ul to the City C

Community Activities that you have been involved with (feel free to attach additional pages)

RECEIVED

MAR 19 2018



COMMISSION/COMMITTEE APPLICATIONY CLERK

Applying for: Planning Commission

Special Requirements:

Youth Advisory Commission: Must be a Lathrop resident between 13 to 18 years of age to serve on this commission Senior Advisory Commission: Must be 50 years of age or over and a registered voter to serve on this commission. Planning and Parks & Recreation Commissions: Must be a Lathrop resident and a registered voter to serve on this commission.

Name: Vene Espinoza
Address: Zip: 95330
Telephone (home)
Telephone (cell) Telephone (other)
Email: Resident of the City of Lathrop: years
Do you have Transportation to attend the Commission meetings and Functions? Yes No D
Background Information:
Are you related to a current City Employee? NO
If yes, give name and relationship
Stanislaus County Dept of Workforco Development 12/2009 Organization Location Responsibilities/accomplishments: Program Development and crase management For Programs and working with individuals relentering the Workforce. Date
Location Position(s)
Responsibilities/accomplishments:

Parent/Guardian Signature (Required for Youth Advisory Candidates only)

MAR 21 2018



COMMISSION/COMMITTEE APPLICATION OF LATHROP

Applying for: Planning Commissioner

Special Requirements:

Youth Advisory Commission: Must be a Lathrop resident between 13 to 18 years of age to serve on this commission Senior Advisory Commission: Must be 50 years of age or over and a registered voter to serve on this commission. Planning and Parks & Recreation Commissions: Must be a Lathrop resident and a registered voter to serve on this commission.

Name: <u>Jennifer</u> D. Torres - O' Callaghan
Address: City: 1 a throp zip: 95330
Telephone (home) Telephone (work)
Telephone (cell)
Email: Resident of the City of Lathrop: years
Do you have Transportation to attend the Commission meetings and Functions? Yes No D
Background Information:
Are you related to a current City Employee?
If yes, give name and relationship
Employment/Volunteer Information:
City of Lathrop: Planney Commission 6/2014 - Present Date
Lathrop, CA Chair, Wice Chair, Brood Member Docation (s)
Responsibilities/accomplishments: <u>Review's applications as regions by John As believen codes</u> , Reviewing a communding to City Cancil (long range) City of Lathon: Coencil Plan, Pewis, of Courted Insportant pages
City of Lathrap: Measure C Citizen's Oversity Committee 4/13-6/14 Organization Date
Lathrop CA Chair Location Position(s)
Responsibilities/accomplishments: Revisio projected City experitures to be consistent of measure a company provities of revenue created by water appared necessary (tax.
As their, I presided our meeting, mainting dearen of district in ancienting

		-	- ,
CHY & Lattrop; Partes + Receive	cattor Comptee: 1 Position/Responsibilities	Vice Chair - Dates	7/12-6/14
Name of Organization Position	Pasi dut d Chan n/Responsibilities/Accomplishmen		111 - present
Special Awards or Recognitions you Dames B South Endowed Schole Research + 1.9 mithy + Rul Es	scho Awardee, Witken	Award of Excollence	in legal
Educational Information:			
U.C. Berleey Educational Institution	B, A, Degree/Diploma	Rhetoic Field	1995 Year
Colden Gat University Scholf	Low Jo Do Degree/Diploma	Law Field	2009 Year
Additional Information (Please pro reviewing you application.)			
love raising my family in I am an advocate for	n on various committed to proper call citizens to a	assimpte about	Or Commonty
believe in fiscal respon	shifty and last	hos's Safety is	always on
continue working on pre		athor to every	
Please sign and date you application	n and submit to the Office o	of the City Clerk at the a	address below
Signature	Date	3/21/18	

Community Activities that you have been involved with (feel free to attach additional pages)

City Clerk City of Lathrop 390 Towne Centre Drive Lathrop, CA 95330

Parent/Guardian Signature (Required for Youth Advisory Candidates only)



COMMISSION/COMMITTEE APPLICATION

Applying for: Planning Couldssion RECEIVE

Special Requirements:

Youth Advisory Commission: Must be a Lathrop resident between 13 to 18 years of age to serve on this commission 4 2016 Senior Advisory Commission: Must be 50 years of age or over and a registered voter to serve on this commission.

Planning and Parks & Recreation Commissions: Must be a Lathrop resident and a registered voter to serve on this commission.

Planning and Parks & Recreation Commissions: Must be a Lathrop resident and a registered voter to serve on this commission.

Name: Dane Lazard	
Address:	
Telephone (home)	ephone (work)
Telephone (cell) Tel	ephone (other)
Email:	Resident of the City of Lathrop: years
Do you have Transportation to attend the Commission m	eetings and Functions? Yes No 🗆
Background Information:	
Are you related to a current City Employee?	
If yes, give name and relationship	
Employment/Volunteer Information:	
Lathrop Grons	2009
Organization Latinop	Sacretary / Treason
Location	Position(s)
Responsibilities/accomplishments:	
Relay for life	
Organization /	Date
Location	Position(s)
Responsibilities/accomplishments:	

Name of Organization	Position/Responsibilities	Date	S
Name of Organization	Position/Responsibilities/Accomplishments	Date	S.S
Special Awards or Rec	ognitions you have received:		
Educational Information	on:		
Educational Institution	Degree/Diploma	Field	Year
Educational Institution Additional Information	Degree/Diploma n (Please provide any other information which	Field vou feel would be us	Year Year reful to the City Council in
reviewing you application.		you you would be us	gar to the City Council in
Please sign and date yo	u application and submit to the Office of t	he City Clerk at th	e address below
Diane	Racard B	/31/20	18
Signature	1 U Date /	v	

Community Activities that you have been involved with (feel free to attach additional pages)

Parent/Guardian Signature (Required for Youth Advisory Candidates only)



COMMISSION/COMMITTEE APPLICATION:

Special Requirements:

Applying for: Planning Committee

1 Measure C Co

Youth Advisory Commission: Must be a Lathrop resident between 13 to 18 years of age to serve on this commission Senior Advisory Commission: Must be 50 years of age or over and a registered voter to serve on this commission. Planning and Parks & Recreation Commissions: Must be a Lathrop resident and a registered voter to serve on this commission.

Name:	Diana Radonic, m	BA
Address:	City:	<u>Lathrop</u> Zip: <u>95330</u>
Telephone (home)	Telephone ((work)
Telephone (cell)	Telephone	(other)
Email:	Resid	dent of the City of Lathrop:
Do you have Transpor	ortation to attend the Commission meetings a	and Functions? Yes No D
Background Informa	ation:	
Are you related to a cu	current City Employee? <u>N/A</u>	
If yes, give nar	nme and relationship <u>MA</u>	
Employment/Volunt		
Codifornia, Health Organization	Core Facility, Corrections	2013 - CUITENT Date
577075, Aust	hin Road, Stockton	2613 - CUITENT Date Stoff Scrvice Manager Position(s)
	mplishments: <u>lesponsible for c</u> contracts, procurement,	
		S 2006 - 2013 Date
9th Street, Location	Sacramento, CH Com	munity Program Specialis+II Position(s)
Responsibilities/accor <u>Residential</u> Plans for face delayed person	mplishments: Monitored and a Intermediate Care 7. ilifies that provide se 2015,	had oversight of licensed acifiches Approved program ruices & developmentally

Community Activities that you have been involved with (feel free to attach additional pages)
alley Mountain Reginnal Center, Community Vialson 1995 - 2006 Name of Organization Position/Responsibilities Dates
Ad QH (ONSUltation, Owner, business plans for new 2000 - CONTINE Name of Organization Position/Responsibilities/Accomplishments business Dates
Special Awards or Recognitions you have received: <u>CMS- Certificate for audiking</u> the international cure fucilities,
Educational Information:
University of Phoenix Muster Legree Business Administration 200; Educational Institution Degree Diploma Field Year
Humphreus College BS Bralegee/Skurdies 1997 Educational Institution Degree/Diploma Field Year
Additional Information (Please provide any other information which you feel would be useful to the City Council in reviewing you application.)
I developed the admissions and discharge unit at the CHCF-PIT 3 am the chair of the Forms Review Connites sing 2014.
of mony licensed usidential funitions. Those extensive Unowledge of local, state & lederal equelation and how
community, state i federal lund throughout my current.
Please sign and date you application and submit to the Office of the City Clerk at the address below
Signature Signature Signature Signature Signature Signature
Parent/Guardian Signature (Required for Youth Advisory Candidates only)



COMMISSION/COMMITTEE APPLICATION

CITY CLERK

Applying for: 100

Planning Commi

Special Requirements:

Youth Advisory Commission: Must be a Lathrop resident between 13 to 18 years of age to serve on this commission Senior Advisory Commission: Must be 50 years of age or over and a registered voter to serve on this commission. Planning and Parks & Recreation Commissions: Must be a Lathrop resident and a registered voter to serve on this commission.

Name: AJIT SINGH SANDHII
Address: City: (ATHROP Zip: 95330
Telephone (home)
Telephone (cell) Telephone (other)
Email: years
Do you have Transportation to attend the Commission meetings and Functions? Yes V No
Background Information:
Are you related to a current City Employee?
If yes, give name and relationship
Employment/Volunteer Information:
An Indopendent representative of Primereca life Ins. Coy
4707 Greenfiel CT. Scite 1 Modests. DIVISION LEADER 15356 Position(s)
Responsibilities/accomplishments: An Dudendendent representative of Irunerica Funguiel Services Markeling inc
Organization Date .
Location Position(s)
Responsibilities/accomplishments:

Community Activities that you have been involved with (feel free to attach additional pages) 1 Sikh Temple Fairfield Name of Organization Position/Responsibilities rans Day Committee of Position Responsibilities Accomplishments a club Member lathrop, Parks of Recoglion Special Awards or Recognitions you have received: **Educational Information:** Additional Information (Please provide any other information which you feel would be useful to the City Council in reviewing you application.) Please sign and date you application and submit to the Office of the City Clerk at the address below.. 10- 2018 Signature Parent/Guardian Signature (Required for Youth Advisory Candidates only) City Clerk

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