



# **City Council Vacancy Application** ***for Term Ending December 2026***

**Submit application to:**  
Office of the City Clerk  
390 Towne Centre Drive  
Lathrop, CA 95330

**Personal Information:**

Registered  
Name: \_\_\_\_\_  
*Last* *First* *Middle*

Address: \_\_\_\_\_  
*Street* *City* *State* *Zip*

Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Resident of the City of Lathrop: \_\_\_\_\_ years

**Background Information:**

Why do you wish to serve as an appointed member of the City Council: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What would you bring by way of perspective or experience to the City Council: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Employment/Volunteer Information:**

Please list any qualifications you feel would provide positive input to the work of the City Council.

Organization: \_\_\_\_\_ Dates: \_\_\_\_\_

Location: \_\_\_\_\_ Position(s): \_\_\_\_\_

Responsibilities/accomplishments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Organization: \_\_\_\_\_ Dates: \_\_\_\_\_

Location: \_\_\_\_\_ Position(s): \_\_\_\_\_

Responsibilities/accomplishments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Organization: \_\_\_\_\_ Dates: \_\_\_\_\_

Location: \_\_\_\_\_ Position(s): \_\_\_\_\_

Responsibilities/accomplishments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Organization: \_\_\_\_\_ Dates: \_\_\_\_\_

Location: \_\_\_\_\_ Position(s): \_\_\_\_\_

Responsibilities/accomplishments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Community Activities** that you have been involved with (feel free attach separate pages):

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<i>Name of Organization</i>	<i>Position/Responsibilities/Accomplishments</i>	<i>Dates</i>
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<i>Name of Organization</i>	<i>Position/Responsibilities/Accomplishments</i>	<i>Dates</i>
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**Special awards or recognitions you have received:** \_\_\_\_\_

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**Education Information:**

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<i>Educational Institution</i>	<i>Degree/Diploma</i>	<i>Field</i>	<i>Year</i>
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<i>Educational Institution</i>	<i>Degree/Diploma</i>	<i>Field</i>	<i>Year</i>
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**Additional Information** (Please provide any other information which you feel would be useful to the City Council in reviewing your application.)

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*Civic service is a privilege and responsibility of interested, qualified, sincere citizens. The value and importance of wide participation of a large number of citizens cannot be measured. Your interest in serving on the City Council of the City of Lathrop is greatly appreciated.*

General Information: Your application is a public document and will be kept on file for one year. If you would like additional information, please call the City Clerk's Office, at (209) 941-7230.

**Please sign and date your application and submit to the Office of the City Clerk.**

Thank you.

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Signature

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Date

*This page will be issued to the San Joaquin County Registrar of Voters Office to ensure the applicant is registered in the City of Lathrop. Fill out the top portion listed as "Candidate Information" and leave the bottom portion blank listed as "For Registrar of Voters Staff Only"*

Candidate Information

Registered Name: \_\_\_\_\_  
Last First Middle

Preferred Name: \_\_\_\_\_ Phone: \_\_\_\_\_

District: \_\_\_\_\_

Office Sought: \_\_\_\_\_

Residence Address: \_\_\_\_\_  
Street Apartment/Unit #

City State Zip Code

Mailing Address: \_\_\_\_\_  
Street Apartment/Unit #

City State Zip Code

Email Address (Required): \_\_\_\_\_

Candidate Signature: \_\_\_\_\_

**\* Your signature authorizes the Registrar of Voters' Office to update your voter registration address**

FOR REGISTRAR OF VOTERS OFFICE STAFF ONLY

The candidate is:  Active  In District  Out of District

The candidate is:  Inactive (please have candidate contact our registration department at 209-468-VOTE)

Registered at a different address

Not a registered voter (please instruct candidate to register to vote)

Verified by: \_\_\_\_\_ & \_\_\_\_\_ Date: \_\_\_\_\_