CITY OF SAN MATEO
CITY SERVICES ACADEMY
REGISTRATION FORM

Season: ☐ Spring or ☐ Fall
Year:_____

For Official Use Only
☐ Registered _____
☐ Not Registered _____
☐ Waiting List _____

Requirements:

- Be at least 18 years of age
- Live or work in the city of San Mateo
- Commit to attending the presentations

Background Information *(Please Print Clearly)*:

Name: _____ _____ Gender: M ☐ F ☐
First Last

Are you at least 18 years of age? Yes_____ No_____

Home Phone: (_____) _____ Home FAX: (_____) _____

E-mail Address: _____

Residence Address: _____
No. & Street City ZIP + 4

I have resided/worked in San Mateo since _____

Current Occupation: _____

Employer: _____

Business Phone: (_____) _____ Business FAX: (_____) _____

Business Address: _____
No. & Street City ZIP + 4

Emergency Notification: _____ Phone: (_____) _____

Please answer the following questions:

1. Have you worked or volunteered for, or held office in, the City of San Mateo? ☐ Yes ☐ No

   If yes, which department and when?_____
2. How did you become interested in our academy? _____
3. I am interested in participating in your program because _____
4. Do you wish your name to be added to the class roster? ☐ Yes ☐ No

Please list any other pertinent background information (business, education, and community involvement) which you feel is important: _____

I hereby absolve the City of San Mateo, its employees and officers from all liability, which may arise as the result of my participation in this Academy.

Signature of applicant _____ *Date* _____

Mail or deliver applications to:
City Services Academy, San Mateo City Manager's Office, 330 West 20th Avenue, San Mateo, CA 94403

- Opportunities for applicants are provided without regard to religion, creed, race, national origin, age, or sex.
- In compliance with the Americans with Disabilities Act, those requiring accommodation for the City Services Academy meetings should notify the academy coordinator at (650) 522-7000 prior to the first meeting.