



# CITY OF SAN MATEO CITY SERVICES ACADEMY REGISTRATION FORM

For Official Use Only	
<input type="checkbox"/>	Registered _____
<input type="checkbox"/>	Not Registered _____
<input type="checkbox"/>	Waiting List _____

Year: \_\_\_\_\_

### 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: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

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 \_\_\_\_\_

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 20<sup>th</sup> 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) 522-7019 prior to the first meeting.