



City of Long Beach, Department of Parks, Recreation and Marine
George Chapjian, Director
2760 Studebaker Road • Long Beach • 90815

Application for THE GOLF ADVISORY COMMITTEE

ALL APPLICANTS MUST:

- Submit a completed application and any background material relative to golf-related knowledge or strengths
- Read and understand the expectations of Committee membership
- Write legibly, if handwriting application, and sign the application
- Return completed application and support materials to the attention of Bob Livingstone at address above

Are you applying for a Club Member or At Large Position: _____

Check here if this is a reappointment request?

Mr.	<input type="checkbox"/>	Last Name: _____	
Mrs.	<input type="checkbox"/>		
Ms.	<input type="checkbox"/>	First Name: _____	Middle: _____
Dr.	<input type="checkbox"/>		

Resident Address: _____ City: _____ Zip: _____

Resident Phone: (_____) _____ Email address: _____

Business Address: _____ City: _____ Zip: _____

Business Phone: (_____) _____ Cell/ Fax/Other (please indicate): (_____) _____

If applicable, how long have you been a Long Beach resident? _____ Years Are you a Registered Voter? _____

The Purpose of the Golf Advisory Committee is to provide a mechanism for ongoing citizen input to the Director of the Department of Parks, Recreation and Marine, who is the City Manager's designee for the operation of the City's municipal golf course system

The general duties of the Committee are to:

- 1) Suggest and/or review proposed modifications to the City's Golf Operations Manual, and various Policies and Procedures for the City's Golf Operation.
- 2) Suggest and/or review proposed changes to the City Golf Course Fees.
- 3) Recommend annual expenditures from the City Golf CIP Fund.
- 4) Apprise the Department of trends and issues in the golf business.
- 5) Perform such other tasks as requested by the Director in furtherance of the Purpose of the Committee.

It is expected that members of the Committee will commit to offering their best judgment and recommendations on the proper management of the City's Golf Operation as an asset of all residents of the City of Long Beach.

The Department of Parks, Recreation and Marine will retain your application on file for two (2) years.
For questions or additional information please contact the Superintendent of Golf Operations at (562) 570-3122

PLEASE EXPLAIN WHY YOU WISH TO SERVE and/or THE BACKGROUND OR STRENGTHS YOU WOULD BRING TO THE COMMITTEE (you may also attach a resume and/or personal statement):

EDUCATION HISTORY

Institution attended:	Degree:	Major:
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PROFESSIONAL LICENSES/CERTIFICATES

License/ Certificate:	Year Issued:	Issuing Agency/ State:
License/ Certificate:	Year Issued:	Issuing Agency/ State:

PERSONAL REFERENCES:

Name:	Phone:
Name:	Phone:

STATISTICAL INFORMATION (optional):

To ensure adequate representation of the City's diversity, you may choose to volunteer the following information:

Gender: M F

Ethnicity: Caucasian Latino/ Hispanic Asian/Pacific Islander African-American other:

Additional information you'd like to share (ie: LGBT):

I, the undersigned, state that all information provided is true and accurate. In addition I have read and agree to the above expectations and conditions of the appointment process.

Applicant Signature: _____ **Date:** _____

***Please note that this application must be submitted with an original signature.**

Background Check: All applicants are subject to an investigation relating to their background.

