Colusa Local Agency Formation Commission (LAFCo)
PO Box 348, Yuba City, CA 95992
colusa.lafco@gmail.com
(530) 632-4406

APPLICATION FORM
Alternate Public Member

Name:
Address:
Telephone:
E-Mail:
Present Employer:
Length of residence in Colusa County:

Are you an officer or employee of a county, city, or special district in Colusa County?

Do you anticipate any Conflicts of Interest related to matters before the Commission?

Describe your occupational experience and/or educational background.

Describe your experience in local government.

Describe your experience in local community organizations.

Describe all current Boards, Commissions, or Committees that you serve on.

Describe all previous Boards, Commissions, or Committees that you served on.

Why are you interested in serving on the Commission?

How would your background and/or experience benefit the Commission and general public?

Signature:_____ Date:

This application form must be received by Monday, **September 28, 2026** by 5:00 p.m.