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City Clerk's Office

MAY 12 2014

RECEIVED

CITY OF MILPITAS
COMMISSION/COMMITTEE APPLICATION

SENIOR ADVISORY COMMISSION
COMMISSION APPLYING FOR ↑

PROVIDE COMPLETE INFORMATION (in black ink)

☑ Mr.

☐ Mrs./Ms./Miss

Name: Willy (First) Middle Wong (Last)

[redacted]

Address: Number Street (apt. # if needed) City & Zip Code

408-946-4015 — Telephone Number(s)

willyw798@gmail.com — e-mail address

RETIRED — Present Employer

Business Telephone

Business Address

Occupation

Education: If **Youth Advisory Commission** applicant, indicate your grade/school: _____

College, Professional, Vocational, or other schools attended	Major Subject	Date	Degree
CAL POLY	ENGINEERING		BS

List community organizations to which you belong or have belonged (additional information may be attached). If application is for ***Veterans Commission***, indicate branch and service in any U.S. military organization (retired or active duty).

Date	Name of Organization or Branch of Military	Officer / Member

Briefly describe the personal qualifications you possess which you believe would be an asset (additional information may be attached):

I have sufficient time to devote to this responsibility and will attend the required meetings if I am appointed to fill a future vacancy. I hereby certify that all statements contained in this application are true.

Signature

5/11/14
Date

Appointments to Commissions or Committees are made by the Mayor with the concurrence of the City Council. **Applications not acted upon will expire after one year from the date submitted unless renewed by the applicant.**

NOTE: ALL COMMISSION APPLICATIONS ARE PUBLIC RECORD

Mail, email or drop off your completed application to:

City Clerk, 455 E. Calaveras Blvd., Milpitas, CA 95035, email: mlavelle@ci.milpitas.ca.gov

STUDENT REP

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City Clerk's Office
MAY 19 2014
RECEIVED

CITY OF MILPITAS
COMMISSION/COMMITTEE APPLICATION

SISTER CITY COMMISSION (STUDENT LIAISON)
COMMISSION APPLYING FOR

PROVIDE COMPLETE INFORMATION (in black ink)

☐ **Mr.**

☒ **Mrs./Ms./Miss**

Name: Mikayla (First) Jade (Middle) Horyza (Last)

[redacted]

Telephone Number(s) **e-mail address**

Present Employer **Business Telephone**

Business Address **Occupation**

Education: If **Youth Advisory Commission** applicant, indicate your grade/school: 9th, Milpitas High School

College, Professional, Vocational, or other schools attended	Major Subject	Date	Degree

List community organizations to which you belong or have belonged (additional information may be attached). If application is for ***Veterans Commission***, indicate branch and service in any U.S. military organization (retired or active duty).

Date	Name of Organization or Branch of Military	Officer / Member

Briefly describe the personal qualifications you possess which you believe would be an asset (additional information may be attached):
Worked with Brenda Su, current liaison, on the e-pal project. Am enrolled in the Japanese course at Milpitas High for the 2014-2015 school year.

I have sufficient time to devote to this responsibility and will attend the required meetings if I am appointed to fill a future vacancy. I hereby certify that all statements contained in this application are true.

Parent: Stanley Horyza
Student: Mikayla J. Horyza
Signature

May 17th, 2014
Date

Appointments to Commissions or Committees are made by the Mayor with the concurrence of the City Council. **Applications not acted upon will expire after one year from the date submitted unless renewed by the applicant.**

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CITY CLERK'S OFFICE
MAR 0 5 2014
RECEIVED

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CITY OF MILPITAS
COMMISSION/COMMITTEE APPLICATION

VETERANS COMISSION, ALTERNATE MEMBER #2
COMMISSION APPLYING FOR ↑

PROVIDE COMPLETE INFORMATION (in black ink)

☑ **Mr.**

☐ **Mrs./Ms./Miss**

Name: ANDRÉ (First) JAY (Middle) M. RAMONES (Last)

[redacted]

Address: Number Street (apt. # if needed) City & Zip Code

(408) 823-2855
Telephone Number(s)

ajramones@gmail.com
e-mail address

KAISER PERMANENTE
Present Employer

(408) 851-8000
Business Telephone

3800 HOMESTEAD RD, SANTA CLARA
Business Address

RADIATION THERAPIST
Occupation

Education: If **Youth Advisory Commission** applicant, indicate your grade/school: _____

College, Professional, Vocational, or other schools attended	Major Subject	Date	Degree
FOOTHILL COLLEGE	RADIATION THERAPY	2004	ASSOCIATES IN SCIENCE
SANTA CLARA UNIVERSITY	BIOLOGY	1997	BACHELOR IN SCIENCE

List community organizations to which you belong or have belonged (additional information may be attached). If application is for ***Veterans Commission***, indicate branch and service in any U.S. military organization (retired or active duty).

Date	Name of Organization or Branch of Military	Officer / Member
2005-PRESENT	U.S. ARMY, NATIONAL GUARD (CALIFORNIA)	SERGEANT FIRST CLASS E7
2001 - 2005	INACTIVE READY RESERVE	SERGEANT E5
1998 - 2001	U.S. ARMY (ACTIVE DUTY)	SERGEANT E5

Briefly describe the personal qualifications you possess which you believe would be an asset (additional information may be attached):
I HAVE BEEN A RESIDENT OF MILPITAS SINCE 2009. I HAVE SERVED TWO OVERSEAS COMBAT TOURS (OPERATION IRAQI FREEDOM 2008 & OPERATION ENDURING FREEDOM AFGHANISTAN 2013). BEING A VETERAN MYSELF MAKES ME VERY AWARE OF THE NEEDS OF THE VETERAN COMMUNITY. THE VETERAN POPULATION IS UNIQUE & I WOULD BE HONORED TO BE A REPRESENTATIVE/ADVOCATE FOR THEM.

I have sufficient time to devote to this responsibility and will attend the required meetings if I am appointed to fill a future vacancy. I hereby certify that all statements contained in this application are true.

Signature _____ 03 MAR 2014 **Date**

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City Clerk's Office

JUN 05 2014

RECEIVED

CITY OF MILPITAS
COMMISSION/COMMITTEE APPLICATION

Veterans
COMMISSION APPLYING FOR ↑

PROVIDE COMPLETE INFORMATION (in black ink)

☒ **Mr.**

☐ **Mrs./Ms./Miss**

Name: Edward (First) John (Middle) Ackerman (Last)

[redacted]

Address: Number Street (apt. # if needed) City & Zip Code

(408) 946-7176 HM / (408) 888-7097 CEL } Ackerman3@Earthlink.net
Telephone Number(s) **e-mail address**

State of CA / Dept Consumer affairs / Pest Board (408) 263-8841
Present Employer **Business Telephone**

2005 Evergreen St. Ste 1500, Sacramento Investigator
Business Address **Occupation**

Education: If **Youth Advisory Commission** applicant, indicate your grade/school: _____

College, Professional, Vocational, or other schools attended	Major Subject	Date	Degree

List community organizations to which you belong or have belonged (additional information may be attached). If application is for ***Veterans Commission***, indicate branch and service in any U.S. military organization (retired or active duty).

Date	Name of Organization or Branch of Military	Officer / Member
68-72	U.S. Navy	
09-14	American Legion Post 873	

Briefly describe the personal qualifications you possess which you believe would be an asset (additional information may be attached):
I have a friendly outgoing personality that pays attention to detail. I have a lot of knowledge in planning, organizational, and execution. My experience as a corpsman in both the hospital and shipboard makes me aware and empathetic to all veterans.

I have sufficient time to devote to this responsibility and will attend the required meetings if I am appointed to fill a future vacancy. I hereby certify that all statements contained in this application are true.

Edward J Ackerman
Signature

05 June 2014
Date

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