



## CULTURAL ADVISORY COUNCIL APPLICATION FORM

1. Mr. \_\_\_\_\_  
Mrs. \_\_\_\_\_  
Ms.                      First                                      Middle                                      Last

2. Residence Address: \_\_\_\_\_  
\_\_\_\_\_  
City    State                                      Zip  
Home Phone (\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

3. Professional Title: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
City    State                                      Zip  
Work Phone (\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_  
Cellular (\_\_\_\_) \_\_\_\_\_ Emergency Contact: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

4. Educational History:  
*College/Graduate School (Location)                                      Date                                      Degree*  
\_\_\_\_\_  
\_\_\_\_\_  
*High School or Equivalent (Location)                                      Date                                      Diploma*  
\_\_\_\_\_

5. Please list professional licenses and certificates you currently hold if applicable:  
*Licenses/Certificates                                      Date Issued                                      Licenses/Certificate                                      Date Issued*  
1) \_\_\_\_\_ 3) \_\_\_\_\_  
2) \_\_\_\_\_ 4) \_\_\_\_\_

6. List all organizations and societies of which you are currently a member. Attach an additional sheet as necessary.  
*Organization/Society* *Member Since*

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7.  Yes  No Are you a citizen of a country other than the United States? If so, please identify country.

8.  Yes  No Are you able to commit to the minimum requirements to serve as outlined in the organization's by-laws (i.e.: attend 75% of meetings in a calendar year, participate in at least one State Fair activity relating to multicultural activities, outreach or entertainment)?

9.  Yes  No Have you ever been affiliated (as an officer, owner, director, trustee, partner, advisor or consultant) with any institutions (corporations, firms, partnerships, business enterprises, non-profit organizations, etc.) which might present a potential conflict of interest or appearance of a conflict of interest? If yes, please explain.

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10.  Yes  No Do you or any members of your immediate family own an interest in any enterprise, which does or might do business with the fair? If yes, please explain.

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11.  Yes  No Do you or any members of your immediate family own any interest in any real property adjacent to or in proximity with the fairgrounds? If yes, please explain.

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12.  Yes  No Is there anything in your background, which if made known to the general public through your appointment would cause an embarrassment to you and/or Cal Expo? If yes, please explain.

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13. Please set forth your interpretation of the mission of the Cultural Advisory Council to the California Exposition & State Fair.

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14. Please explain why you would like to serve on the Cultural Advisory Council to the California Exposition & State Fair.

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15. Based on your experience and assessment of this year's State Fair, what are two recommendations you would make to the Cultural Advisory Council (If you did not attend write "not applicable")?

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16. How do you feel you would add value to the Cal Expo Cultural Advisory Council? What unique characteristics, qualifications, perceptions and experiences do you offer?

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17. Please attach your resume or biography.

18. Certification – I hereby certify that all information set forth above and within this application and any attachments, is true and accurate to the best of my knowledge.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Application Form must be received with resume or biography by October 31, 2022.**

**Return by mail to:  
Sue O'Brien  
Cal Expo  
P.O. Box 15649  
Sacramento, CA 95852**

**Return by Email to:  
Sue O'Brien - [sobrien@calexpo.com](mailto:sobrien@calexpo.com)**

**Return by Fax to:  
916-263-3304**