



R Street Sacramento Partnership Board Application

Name: _____

Phone: _____ Email: _____

Mailing Address: _____ City _____ Zip _____

Occupation and employer: _____

Why are you interested in joining our organization?

What personal skill or strength of yours do you think would benefit our organization?

Within the R Street Sacramento Partnership are you currently a:

Property Owner YES NO

Business Owner YES NO

If yes, which business? _____

Resident YES NO

If yes, please specify your address: _____

The R Street Sacramento Partnership Board meets once a month on the fourth Thursday at 9 am. Do you see any scheduling problem that might affect your attendance?