



City of Ione  
Ione Community Preservation Project  
**COMMITTEE APPLICATION**

**CONTACT INFORMATION:**

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**BACKGROUND:**

Profession: \_\_\_\_\_

Do you have any City affiliations? If so, what are they?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WHICH COMMITTEE ARE YOU INTERESTED IN?**

Organization

Design

Promotion

Economic Restructuring