



**City of San Diego Commission for Arts and Culture
Commission Advisory Panel Nomination Form**

To serve on a Commission Advisory Panel (CAP) for the Organizational Support Program (OSP), Creative Communities San Diego Program (CCSD), or Public Art Program, please submit this form with the appropriate attachments as described below. Self-nominations are accepted. For additional information please contact the Commission at (619) 236-6778 or lsokol@sandiego.gov.

Name	
Mailing Address	
City, State, Zip	
Day Telephone	
Fax	
Email	
Employer	
Title	

Check all area(s) of nominee's expertise and circle the three strongest areas:

- | | | |
|--|--|---|
| <input type="checkbox"/> Accounting/Finance | <input type="checkbox"/> Humanities | <input type="checkbox"/> Public Art |
| <input type="checkbox"/> Architecture | <input type="checkbox"/> Legal | <input type="checkbox"/> Service Programming |
| <input type="checkbox"/> Arts Administration | <input type="checkbox"/> Literature | <input type="checkbox"/> Theatre |
| <input type="checkbox"/> Business Administration | <input type="checkbox"/> Media | <input type="checkbox"/> Tourism |
| <input type="checkbox"/> Community Development | <input type="checkbox"/> Multi-Disciplinary | <input type="checkbox"/> Visual Art |
| <input type="checkbox"/> Dance | <input type="checkbox"/> Museum Management | <input type="checkbox"/> Landscape Architecture |
| <input type="checkbox"/> Festivals | <input type="checkbox"/> Non-Profit Management | <input type="checkbox"/> Urban Design |
| <input type="checkbox"/> Grant Administration | <input type="checkbox"/> Music | <input type="checkbox"/> Other : _____ |

Check nominee's ethnic affiliation and gender (optional):

- | | | |
|--|--|---------------------------------|
| <input type="checkbox"/> American Indian/Alaska Native | <input type="checkbox"/> Hispanic//Latino/Mexican-American/Chicano | <input type="checkbox"/> Male |
| <input type="checkbox"/> Asian/Pacific Islander | <input type="checkbox"/> White/Caucasian/Euro-American | <input type="checkbox"/> Female |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> Other _____ | |
| <input type="checkbox"/> Filipino | | |

Please attach the following:

- Letter outlining the reasons for your nomination or your interest in participating as a CAP member
- Resume and/or bio

Return this completed form with attachments via:

Email: lsokol@sandiego.gov

Mail: City of San Diego Commission for Arts and Culture
ATTN: CAP Nominations
1200 Third Avenue, Suite 924
San Diego CA 92101
Fax: (619) 236-6812

*Please note, all panelists must formally declare conflicts of interest before serving.
Artists serving on public art panels are not eligible to apply for the related public art project competitions.
Arts Administrators and Board Members will not be assigned to review applications for the same allocations program to which they apply.*