



CITY OF SUISUN CITY
RECREATION, PARKS, MARINA & ARTS COMMISSION
SUPPLEMENTAL QUESTIONNAIRE

PLEASE PROVIDE THE FOLLOWING INFORMATION.

Attach a separate sheet of paper to this application with your responses.

1. Do you have a background or direct experience in any of the arts? If you consider yourself an artist, you may include as an attachment pictures of your art.
2. What is your vision for the arts in Suisun City?
3. What are your major interests or concerns for including the public art in Suisun City?
4. What experience or education do you have regarding public art?

I hereby certify that my responses to the supplemental questionnaire are true in all respects and understand that any falsification or omission may be cause for disqualification. I understand and agree that this document is a public record subject to disclosure under the Public Records Act.

Applicant's Signature

Date

Return:

Suisun City Clerk's Office
701 Civic Center Boulevard
Suisun City, CA 94585
Email dpock@suisun.com