

Application to Serve on the County of San Diego Independent Redistricting Commission

This is your application to serve as a Commissioner on the County of San Diego's 2020-2021 Independent Redistricting Commission.

Read the tips below to
make sure your
application is complete.

First Name

Last Name

Make sure you have all the pages.

There are nine (9) total pages that make up this application, including this page. The pages are numbered in the bottom right corners.

Initial the top right corner of pages 2-9 in the "Initial Here" box. This will make sure your application stays together.

Print clearly and legibly or type your application. Doing so will speed up processing time. Unclear handwriting may cause delays.

Don't know if you're eligible to serve on the County's Redistricting Commission? Among other requirements, you must be a registered voter in San Diego County to serve on the Commission. See page 3 for more details.

Questions? Learn more at www.sandiegocounty.gov/redistricting or redistricting@sdcounty.ca.gov.

This application must be received no later than Friday, July 31, 2020, at 5 p.m. See page 9 for submittal instructions.



Application Timeline

July 31, 2020	Applications must be received by the San Diego County Clerk of the Board of Supervisors no later than 5 p.m.
August 26, 2020	From the pool of qualified applicants, the Clerk of the Board of Supervisors will post the names of the 60 most qualified applicants. The names will be posted online for at least 30 days.
October 13, 2020	The Clerk of the Board of Supervisors will conduct a random drawing of the qualified applicants at the Board of Supervisors meeting to select eight Commissioners.
October 22 and November 5, 2020	The selected eight Commissioners will meet to choose the remaining six Commissioners from the remaining pool of qualified applicants.

Important Things to Know

- The questions in this application ensure you are eligible to serve on the Commission.
- Answer the questions to the best of your ability.

A. Tell us About Yourself

First Name: _____ Last Name: _____

Address (where you are registered to vote)

Street Address: _____

City: _____

State: _____ Zip Code: _____

Mailing Address (if different than the address listed above)

Street Address: _____

City: _____

State: _____ Zip Code: _____

Contact Information

Phone 1: _____ Type: _____

Phone 2: _____ Type: _____

E-mail: _____

B. How This Application Will Be Used

I understand the contents of this application may be made available to the public.

☐ Yes, I understand

I understand that while this application is a public document, my personal e-mail address, street address, and phone number(s) will be kept confidential to the extent authorized by law.

☐ Yes, I understand

C. Questions to Determine Eligibility

Government Code section 21550 sets forth certain qualifications to serve on this Commission. Please check the appropriate box for each question. Applicants may be asked to verify and update information at various points in the process.

1. Are you a resident of the County of San Diego? ☐ Yes ☐ No

2. Which supervisorial district do you live in? ☐ 1
If you're not sure, visit www.sandiegocounty.gov, click on "Find My District" under the Board of Supervisors, and enter your address in the top right of the web page. ☐ 2
☐ 3
☐ 4
☐ 5

3. Which political party are you currently registered?
☐ Democratic ☐ Republican ☐ American Independent ☐ Green ☐ Libertarian
☐ Peace and Freedom ☐ Other: _____
☐ I am not registered with a political party (non-partisan)

4. Have you been continuously registered to vote in the County of San Diego with the same political party preference or with no political party preference and have not changed your political party preference for at least five years? ☐ Yes ☐ No
If you're not sure, you can check your voter registration at www.sdvote.com.

5. Have you voted in at least one of the last three statewide elections immediately preceding your application to be a member of the Commission? ☐ Yes ☐ No

Explanatory Notes: If necessary, you may further explain answers to the questions above.

6. Within the 10 years immediately preceding the date of this application to the Commission, have either you, or an immediate family member, done any of the following? For purposes of these questions, immediate family members means a spouse, child, in-law, parent, or sibling.

You are not eligible to serve on the Commission if you answer "Yes" to any of the following:

- a. Been appointed to, elected to, or have been a candidate for office at the local, state, or federal level representing the County of San Diego, including as a member of the Board of Supervisors. ☐ Yes ☐ No
- b. Served as an employee of, or paid consultant for, an elected representative at the local, state, or federal level representing the County of San Diego. ☐ Yes ☐ No
- c. Served as an employee of, or paid consultant for, a candidate for office at the local, state, or federal level representing the County of San Diego. ☐ Yes ☐ No
- d. Served as an officer, employee, or paid consultant of a political party or as an appointed member of a political party central committee. ☐ Yes ☐ No
- e. Been a registered federal, state, or local lobbyist ☐ Yes ☐ No

Explanatory Notes: If necessary, you may further explain answers to the questions above.

D. Experience Qualifications

State law requires candidates demonstrate experience in areas related to redistricting. Please provide responses to the following questions.

1. **What experience do you possess that demonstrates analytical skills relevant to the redistricting process and voting rights, and demonstrates your ability to comprehend and apply the applicable state and federal legal requirements?**

You are encouraged to limit your response to one page, however if more space is needed, you may attach an additional page.

2. What experience do you possess that demonstrates an ability to be impartial?

You are encouraged to limit your response to one page, however if more space is needed, you may attach an additional page.

3. What experience do you possess that demonstrates an appreciation for the diverse demographics and geography of the County of San Diego?

You are encouraged to limit your response to one page, however if more space is needed, you may attach an additional page.

E. Demographic Information

Providing this information is optional. You may select “decline to state” for each answer. Elections Code section 21550(g)(2) requires six of the 14 appointees, in addition to meeting minimum requirements, be chosen in a way that ensures the Commission reflects the County’s diversity, including racial, ethnic, geographic, and gender diversity. However, formulas or specific ratios shall not be applied for this purpose.

1. Please describe your ethnic origin. Mark one or more boxes.

- ☐ BLACK/AFRICAN AMERICAN: All persons having origins in any of the original Black racial groups of Africa.
- ☐ HISPANIC/LATINO: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
- ☐ ASIAN: All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- ☐ NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER: All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- ☐ AMERICAN INDIAN/ALASKA NATIVE: All persons having origins in any of the original peoples of North and South America (including Central America), and who maintain cultural affiliation or community recognition.
- ☐ WHITE (not of Hispanic Origin): All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- ☐ Prefer to Self-Describe: _____
- ☐ Decline to state

2. What is your date of birth? _____ ☐ Decline to state

3. Select the gender you identify as:

- ☐ Female
- ☐ Male
- ☐ Non-binary
- ☐ Decline to state

F. Signature

By signing below, I declare under penalty of perjury that the answers provided in this application are true to the best of my knowledge.

First Name: _____ Last Name: _____

Signature: _____ Date: _____

G. Submittal

Completed applications must be received by the Clerk of the Board of Supervisors no later than Friday, July 31, 2020 at 5 p.m. Double check your answers in the application; once submitted, applications cannot be amended. Remember that you must answer all questions on this application to be considered for the Commission. Incomplete applications will not be considered.

Option 1: Mail or drop off the signed paper copy of your completed application to:

County of San Diego
Clerk of the Board of Supervisors
Redistricting Commission
1600 Pacific Highway, Room 402
San Diego, CA 92101-2471
(619) 531-5434

Postmarks are not accepted. Applications must be received by the Clerk of the Board by the due date.

Option 2: E-mail your completed application.

Ensure the application is signed, then e-mail the application to:
redistricting@sdcounty.ca.gov.

Applications must be received by Friday, July 31, 2020, at 5:00 p.m.