

APPLICATION FOR CANDIDACY

CITY OF LOS ANGELES COMMUNITY ACTION AGENCY (CAA)

FOR POVERTY SECTOR REPRESENTATIVE OR POVERTY SECTOR ALTERNATE REPRESENTATIVE

APPLICATIONS ARE DUE NOVEMBER 26, 2003 BY 5:00 P.M. TO:

Community Action Board (CAB)
c/o CDD, HSFD - Planning Section
Attn: Paula Minor
215 West 6th Street, Sixth Floor
Los Angeles, CA 90014

GENERAL INFORMATION

This application may be submitted by any resident of the City of Los Angeles at least 18 years of age, who wishes to become a candidate for the position of Poverty Sector Representative or Alternate Representative to the Community Action Board (CAB) of the City of Los Angeles Community Action Agency. Applicants are to reside in the specific Community Improvement and Planning Area (CIPA) they wish to represent (see attached maps). Applicants must apply for candidate status by submitting an Application for Candidacy. No write-in candidates will be permitted.

Upon submission, each applicant's application will become public information and may be reviewed as such by interested parties. Elections will be held in each CIPA the week of December 15, 2003. Voting location information will be mailed to all interested parties and posted to the CAB website:

www.lacity.org/cdd/cab

The candidate receiving the majority of votes will be elected to the available position in each CIPA. The elected Poverty Sector Alternate Representative will act as CIPA Representative for all CAB functions in the absence of the Poverty Sector Representative. The Poverty Sector Representative and Alternate Representative are to serve a 3-year term. Representatives to the CAB will serve on a voluntary basis, there will be no regular stipend paid to members for their participation in regular CAB activities.

PROTOCOL

All individuals who apply for the position of CAB Poverty Sector Representative and CAB Poverty Sector Alternate Representative will receive a written response from the City of Los Angeles regarding the disposition of their application. The CAB and the Community Development Department (CDD) will review the Application for Candidacy for form and compliance with stated instructions and determine the eligibility of applicants based on this review. The address of the applicant and the addresses of those residents who meet poverty criteria who endorse the applicant, will be reviewed to assure Los Angeles City residency and residency within the CIPA the candidate wished to represent.

The Application for Candidacy consists of four (4) parts which must be completed in full.

I, _____(Please print name), certify that I am a resident of the City of Los Angeles and of the Community Improvement and Planning Area I seek to represent; I am at least 18 years of age and I currently reside at:

(Please print: Street Address, City and Zip Code)

By signing this Application for Candidacy, I also signify that I am not an officer or an employee of an organization contracting to perform a component of the City’s Human Services work program.

I further recognize that should I be selected to fill the position on the CAB and at a later time become an officer or an employee of such an organization, my resignation from the CAB would be mandatory.

By submitting the attached Application, I seek to be recognized as a candidate for the position of

**POVERTY SECTOR REPRESENTATIVE (CIPAs 3 & 7^a only)
OR
POVERTY SECTOR ALTERNATE REPRESENTATIVE (CIPAs 4, 5, & 7^a only)**

representing Community Improvement and Planning Area (CIPA) _____ to the Community Action Board of the City of Los Angeles Community Action Agency.

Attached is my completed Application which consists of the following parts:

- | | | |
|------|---|------------------|
| I. | Signature Page | <u>Form</u>
A |
| II. | Statement of Purpose and Qualifications | B |
| III. | Qualifying Experience | C |
| IV. | Endorsements: | |
| | <ul style="list-style-type: none"> • Nominating Petition Form/ Petition signed by 10 poverty residents of the City of Los Angeles • Two (2) letters of endorsement from community leaders | D
E |

Signature of Applicant _____

Telephone Number _____

Business Telephone Number _____

(if applicable) _____

FormA

^a The primary vote winner in CIPA 7 will be the Representative, the secondary vote winner will be the Alternate Representative

PART II: STATEMENT OF PURPOSE AND QUALIFICATIONS

FORM B

Please make a brief statement (100 words or less) describing your reason(s) for seeking a position as a Poverty Sector Representative or Poverty Sector Alternate Representative on the Community Action Board of the City of Los Angeles Community Action Agency. Also, please describe what you consider your qualifications to be.

STATEMENT: (You may use additional paper.)

PART III: QUALIFYING EXPERIENCE

FORM C

An applicant must have at least (2) two years of experience gained through working on poverty-related issues and/or activities, as a paid worker and/or as a voluntary participant affiliated with a recognized organization. This experience MUST have been gained within the past (5) five years.

For each involvement/activity cited in the right column, the applicant must provide the related information in the left column.

Please use the spaces below in the right column to describe your experience. For each work/activity cited in the right column, the applicant must provide all information requested in the left columns.

Dates:	Contact Person:	_____	Phone:	_____
From: _____	Organization:	_____		
	Address:	_____		
To: _____	Description of Work/Activity:	_____		

Dates:	Contact Person:	_____	Phone:	_____
From: _____	Organization:	_____		
	Address:	_____		
To: _____	Description of Work/Activity:	_____		

Dates:	Contact Person:	_____	Phone:	_____
From: _____	Organization:	_____		
	Address:	_____		
To: _____	Description of Work/Activity:	_____		

(Use additional paper if desired)

CANDIDATE NOMINATING PETITION

The Nominating Petition must contain the signatures/endorsements of 10 people in poverty who reside in the CIPA the candidate is applying to represent (see attached maps). For the election, an endorser’s signature is considered valid, only if the person meets all of the following criteria:

- a. The person is a resident of the City of Los Angeles and resides in the CIPA the candidate is applying to represent;
- b. The person is at least 18 years of age; and
- c. The person is a “person in poverty” as determined by one or more of the following criteria:
 - i. the individual’s family income falls within the Poverty Income Guidelines (see chart below)

<u>POVERTY INCOME GUIDELINES</u>	
Size of Family Unit Residing in Same Household	Annual Family Income*
1	8,980
2	12,120
3	15,260
4	18,400
5	21,540
6	24,680
7	27,820
8	30,960

*The income figures given are for non-farm families, pursuant to the 2003 Federal Poverty Income Guidelines.

- ii. the family’s eligibility to receive Temporary Assistance to Needy Families (TANF); or
- iii. the family’s eligibility to receive Supplemental Security Income (SSI).

It is the further responsibility of the applicant to insure that each person who signs their nominating petition is informed of the purposes of the Community Action Agency and the Community Action Board.

Each nominating petition will be reviewed to determine whether it contains the 10 eligible signatures. While it is not required to obtain more than 10 signatures, it is stressed that it is advantageous to do so.

NOTE: It is the responsibility of the applicant to insure that at least 10 of their endorsers meet all three (a., b., & c.) above listed criteria.

NOMINATING PETITION

I, the undersigned resident of the City of Los Angeles and resident of the Community Improvement and Planning Area (CIPA), endorse _____ as a candidate for the position of **POVERTY SECTOR REPRESENTATIVE** or **POVERTY SECTOR ALTERNATE REPRESENTATIVE** to the Community Action Board (CAB) of the City of Los Angeles Community Action Agency. The CAB advises the City Council and the Mayor on issues relating to the administration of the Community Services Block Grant (CSBG), State funding to help eliminate the causes and ameliorate the conditions of poverty.

I understand that the above-mentioned person need not be a person in poverty in order to qualify to be a candidate for **POVERTY SECTOR REPRESENTATIVE** or **POVERTY SECTOR ALTERNATE REPRESENTATIVE**. I do understand, however, that this person must be 18 years of age or older, and a resident of CIPA _____ and obtain the endorsement/signature of at least 10 CIPA _____ poverty residents to meet one of the criteria for becoming a candidate.

I, THE UNDERSIGNED RESIDENT, DECLARE UNDER PENALTY OF PERJURY PURSUANT TO THE LAWS OF THE STATE OF CALIFORNIA THAT THE INFORMATION PROVIDED IS TRUE AND CORRECT

NAME (PLEASE PRINT)	COMPLETE ADDRESS	SIGNATURE

LETTERS OF ENDORSEMENT

The applicant is required to submit two (2) Letters of Endorsement from community leaders as part of the application. Community leaders can be, but do not need to be, associated with the CIPA the candidate is applying to represent. Please limit the letters of endorsement to One (1) page.

The letter must be addressed to the City of Los Angeles Community Action Board and comment on the applicant's qualifications to assume the role of POVERTY SECTOR REPRESENTATIVE or POVERTY SECTOR ALTERNATE REPRESENTATIVE to the CAB.

Such letters of endorsement should come from leaders in the community, who are aware of the situation of poor people in the City of Los Angeles

The letter of endorsement must be signed and include the following information;

- Endorser's Name
- Address
- Home or Business Telephone Number
- Organization (if applicable)