

9. List Organizations and Clubs of which you are a member.

10. List areas of special interest (e.g. housing, transportation, mental health).

11. Check one of the following (optional):

- African American
- Asian/Pacific Islander
- Japanese
- Chinese
- Filipino
- Samoan
- Korean
- Other
- Caucasian
- Latino/Hispanic
- Central American
- Mexican American
- Other
- Native American
- Other _____

Signature of Applicant

Date

Return to: Bridget Badasow
Department of Aging and Adult Services
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