## **BOARD of SUPERVISORS**



City Hall 1 Dr. Carlton B. Goodlett Place, Room 244 San Francisco 94102-4689 Tel. No. (415) 554-5184 Fax No. (415) 554-5163 TDD/TTY No. (415) 544-5227

## Application for Boards, Commissions, Committees, & Task Forces

| Name of Board/Commission/Committee/Task Force: Pa   | ark recreation and open space advisory commite   |
|---|--|
| Seat # (see Vacancy Notice for qualifications): 21 or 22  |  |
| Full Name: John Raul Somoza   |  |
|   | Zip Code: 94112  |
|   | Occupation: Scientist  |
|   | Coccupation:<br>Employer:  |
| Work Phone:   | zip Code:  |
| Business Email: john.somoza@biolojia.com  |  |
| Pursuant to Charter, Section 4.101(a)(2), Boards and Comresidents of the City and County of San Francisco who are authority). For certain appointments, the Board of Superv | e 18 years of age or older (unless otherwise stated in the cod   |
| Check All That Apply:   |  |
| Resident of San Francisco: Yes ■ No □ If No, p  | place of residence:  |
| 18 Years of Age or Older: Yes ■ No □  |  |
|   | w your qualifications represent the communities of interest<br>sex, sexual orientation, gender identity, types of disabilities<br>and County of San Francisco: |
| I am a resident of Mission Terrace (District 11)<br>Spanish and English to be my native language  | . •  |
|   |  |
|   |  |
|   |  |
|   |  |

| Business and/or Professional Experience   | e:                          |  |
|---|-----------------------------|--|
| I am a scientist and have spent t<br>cancer, inflammation and, espec              | •                           | covering and developing new drugs for HIV and hepatitis C).  |
|   |                             |  |
|   |                             |  |
|   |                             |  |
| Civic Activities:   |                             |  |
|   | •                           | International, which focuses on global   |
| 2013-2021 - Vice Chairman of the enrollment, retention and perform                |                             | Girls, which focuses on improving girls' orthern India.  |
| 2019 - Volunteer (intern) in the o  | ffice of Ahsha Safai.       |  |
| 2021 - Volunteer for Project Ope  | n Hand, delivering me       | eals in the Tenderloin.  |
|   |                             |  |
|   |                             |  |
| Have you attended any meetings of the   | body to which you are ap    | plying? Yes ■ No □   |
|   | • •                         | uled public hearing, prior to the Board of Supervisors eived ten (10) days prior to the scheduled public |
| Date:Applic   | ant's Signature (required)  | : John Jonnya  |
|   |                             | (Manually sign or type your complete name.   |
|   |                             | NOTE: By typing your complete name, you are hereby consenting to use of electronic signature.)           |
| Please Note: Your application will be retain public record.  FOR OFFICE USE ONLY: | ned for one year. Once comp | NOTE: By typing your complete name, you are  |

(7/9/2021) Page 2 of 2