

**From:** [webmaster@chulavistaca.gov](mailto:webmaster@chulavistaca.gov)  
**To:** [CityClerk](#); [Karina L. Lafarga](#); [Amanda Angulo](#); [Audrey Malone](#)  
**Subject:** City of Chula Vista - Housing and Homelessness Advisory Commission Application  
**Date:** Monday, September 30, 2024 5:38:20 AM

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A new entry to a form/survey has been submitted.

**Form Name:** Housing and Homelessness Advisory Commission Application  
**Date & Time:** 09/30/2024 5:38 AM  
**Response #:** 53  
**Submitter ID:** 135395  
**IP address:** [REDACTED]  
**Time to complete:** 28 min. , 12 sec.

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#### Survey Details

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#### Application for membership on the Housing Advisory Commission

**1. Prefix**

(o) Mr.

**2. Preferred Pronoun**

(o)  
He/Him/His

**3. First and Last Name**

Gerardo Contreras

**4. Email**

[REDACTED]

**5. Residence Address**

[REDACTED]

**6. City**

Chula Vista

**7. ZIP Code**

91915

**8. Primary Phone**

[REDACTED]

**9. Secondary Phone**

Not answered

**10. I certify that I am a resident of the City of Chula Vista and at least 18 years of age**

Yes

**11. How long have you been a resident of the City?**

13 months

**12. [Please click here to view the interactive map and verify your District of residency](#)**

**I am a resident of the following City Council district.**

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**13. Employer**

Not employed

**14. Occupation**

Educator

**15. Have you ever been employed by the City of Chula Vista?**

No

**16. If you have worked for the City of Chula Vista please provide the department and dates of employment.**

Not answered

**17. Please select the seats for which you are interested and qualify: (select as many as applicable)**

Housing Authority Tenant Representative (this member shall, at the time of their appointments and throughout their terms, reside in assisted housing or receive Section 8 rental housing assistance from the Housing Authority)

Housing Authority Tenant Representative - 62 years of age or older (this member shall, at the time of their appointments and throughout their terms, reside in assisted housing or receive Section 8 rental housing assistance from the Housing Authority)

**18. If you selected the Expertise Seat above, please describe your expertise and experience in the listed field(s). (250 words or less)**

My selections are for; Tenant Representative

Tenant Representative 62 or older

**19. Have you previously served, or do you currently serve, on a Chula Vista Board, Committee or Commission**

No

**20. If yes, which one(s) and for what period of time?**

Not answered

**21. Per Chula Vista Municipal Code Section [2.25.030](#), I understand:**

**-If I am currently serving on a board or commission, I must resign from my current board or commission if I am appointed.**

**-I must have served at least 12 months on my current board or commission in order to be appointed to another board or commission.**

I have read and acknowledged the above statement.

**22. Are you, or have you been, involved in any local, civic, service or community groups?**

No

**23. If yes, please list them**

Not answered

**24. What do you hope to accomplish in the role of a Housing and Homelessness Advisory Commissioner? (250 words or less)**

As part of the Advisory Commission, I would seek to become a knowledgeable and contributing team player. By studying, and developing a prospective that would allow me to provide insights, and feedback based on personal and educational experience. My short term objective is to observe, listen, and develop myself into the position. As a Commissioner I would earnestly strive to be part of the solution and not just part of the problem. I believe that my three plus years as a VASH Choice Voucher participant, has been a blessing in disguise, which I can use to help others who are un-housed, or at risk of becoming homeless.

**25. You may upload a resume in addition to your application (optional).**

**26. The City understands meeting schedules and individual's availability may change. We ask that you consider the [meeting schedule](#) when submitting an application.**

I have reviewed the Housing and Homelessness Advisory Commission regular meeting date, time and frequency.

**27.**

I am familiar with the responsibilities of the Housing and Homelessness Advisory Commission. I attest that the information I have provided is accurate and true.

**28.**

(o) I understand that this application and any documents submitted in connection with the application process are public records and may be publicly disclosed.

Thank you,  
**City of Chula Vista**

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