



BEACH AREA COMMUNITY COURT

Beach Area Community Court
Volunteer Community Impact Panelist Application

(Please Print or Type)

Last Name _____ First Name _____ MI ____

Name of Organization or Affiliation _____

Address _____

City _____ State ____ Zip Code _____

Daytime Phone (____) _____ Evening Phone (____) _____

Fax Number (____) _____ E-Mail _____

A. Please explain your connection to Beach Area (e.g., live, work, or own property in the area).

B. Please explain your interest in the Beach Area Community Court Impact Panel.

C. How did you find out about the Beach Area Community Court Impact Panel?

Please fax or mail your completed application to:

San Diego City Attorney's Office
Neighborhood Prosecution Unit
1200 Third Avenue, Suite 700
San Diego, CA 92101
Fax (619) 533-5549