SA2020 Commission on Strengthening Family Well- being District 4	Application No: No: 20210506013619_11007
ELIGIBILITY	
PROFILE	
Prefix	Mrs
Last Name	Hoffmann
First Name	Amy
Middle Name	Elizabeth
Suffix	
Preferred Name	
Title	
Are you a City of San Antonio resident?	Yes
San Antonio Resident Length - Years	
In which City Council District do you reside?	04
How many years have you lived in the City Council District where you reside?	
Address Type?	
Address	
City	
State	
Zip	78251
Phone Type?	
Phone number	
Phone 2 Type?	
Phone 2 number	
Address 2 Type?	
Address 2	
City 2	
State 2	
Zip 2	
eMail	
Employer	
Job Title	Group Fitness Instructor
Occupation	Group Fitness Instructor
Board/Commission/Committee Name	SA2020 Commission on Strengthening Family Well-being~District 4~~01

DEMOGRAPHIC INFORMATION	
The City of San Antonio strives for boards and commissions to be representative of our diverse community. Providing the following demographic information is voluntary, and will only be used for statistical and reporting purposes.	
Race/Ethnicity (Please select all that apply):	White/Non-Hispanic
Gender:	Female
Age:	35 to 44
Do you identify as a sexual minority (such as lesbian, gay, bisexual, queer, etc.)?	No
QUESTIONS	
If this board position requires residency within Bexar County, the City of San Antonio city limits or within a particular council district, do you meet those residency requirements?	Yes
Do you or any of your immediate family members or any businesses that you or they own currently have any direct or indirect financial interest in any contract(s) with the City, including subcontracts?	No
Will you or any of your immediate family members or any businesses that you or they own seek a contract(s) with the City in the foreseeable future?	No
Do you or any of your immediate family members or any businesses that you or they own have any financial interest, direct or indirect, in any sale to the City of any land, materials, supplies, or service?	No
Does your employer or an employer of your immediate family members have a contract with the City?	No
Do you or any of your family members currently serve or in the past year served as an administrative aide to a Councilmember?	No
Do you currently serve in any elected or appointed public government office?	No
Are you a member and/or officer and/or employee of any boards, commissions, corporations, non-profit entities, agencies, or other entities?	Yes
Give the title and dates of any position which you have held in such organization:	Magnolia Heights HOA President, Murnin ES PTA President, Vale MS PTA Treasurer, BSA Crew Committee Chair, BSA Unit Commissioner
Do you receive any compensation for service on this entity(ies)?	No
Do you intend to seek election or appointment to any public office or board or commission in the foreseeable	No

Have you ever been hired for a position with the City of San Antonio?	No
Describe your Educational history.	Bachelor degree in Business Management
Describe your Professional History & Certification designations (Current and historical).	8 years management experience in restaurant business 4 years as HR/Accounts Payable/office manager at nonprofit 8 years Group Fitness Instructor
Describe your Volunteer Experience & Community Service	9 years PTA President, Treasurer, Fundraiser VP 10 years Girl Scout Troop Leader 6 years Girl Scout Community Outdoor Chair 6 years Girl Scout Trainer 9 years HOA President/Treasurer 6 years BSA Crew Committee Chair 6 years BSA National Leadership Training Wood Badge 6 years LDS Church Stake Camp Director
Please provide a brief narrative outlining your reasons for seeking appointment to this board or commission:	I would like to get more involved in my District then hopefully our City to see how I can have a positive impact where my family lives. I have volunteered in our neighborhood, schools, church and scouts for almost 10 years. I would like to grow in my leadership abilities and volunteering.
APPLICATION SIGN-OFF	
As a board, commission, or committee member, you will be asked to adhere to: Code of Ordinances, City of San Antonio, Part II, Chapter 2, Article IX, Sec.2-534. All board and commission members must file a Financial Disclosure Report with the Office of the City Clerk upon appointment, and annually thereafter, throughout the member's term. Failure to file a Financial Disclosure Report within	

the time required by the City's Ethics Code will be considered an automatic removal.	
I understand that if any member of the public makes a request for information included in this Application for Appointment, most of the information must be disclosed under the Public Information Act. I understand that the City of San Antonio will attempt to maintain the confidentiality of highly private matters by seeking an Attorney General's opinion in accordance with the Public Information Act. I understand that it may not be legally possible to maintain the confidentiality of such information, and I hereby release the City of San Antonio, and its agents, employees and officers, from any and all liability whatsoever if the information must be released pursuant to the Public Information Act or any other law requiring its release.	Acknowledged
OATH: I have read and understand the guidelines set out in this application. The foregoing statements are true, accurate, and complete. I agree that any misrepresentation or omission of facts may result in my disqualification for appointment.	Acknowledged
Enter Your Name	Amy Hoffmann
Date of submission.	5/6/2021
The Texas Public Information Act provides that each government official may choose whether to allow the public access to the information in the custody of the City that contains your home address, home telephone number, or reveals whether you have family members. Please note that this does not apply to business addresses, which are subject to public disclosure. If an open records request is filed requesting to view or obtain records that contain your personal information, the City will take steps to protect your personal information as authorized by the Texas Public Information Act, but only if you have elected to protect personal information.	
I want the public to have access to my Home Address.	Yes
I want the public to have access to my Home Telephone Number.	Yes
I want the public to have access to my Social Security Number.	Yes
I want the public to have access to my Emergency Contact Information.	Yes
I want the public to have access to my Family Information.	Yes
Please attach any additional information, such as a current resume, using the Attachments panel at the bottom of this page.	