Application Form			
Profile			
Jacqueline First Name	M Smith  Middle Last Name		
Home Address		Suite or Apt	
Brentwood City		State	94513 Postal Code
Primary Phone	_		
Email Address		_	
District Locator Tool			
Resident of Supervisori	al District:		
✓ District 3			
The Unity Council Employer	_		
Length of Employment			
14 years			
Do you work in Contra (	Costa County?		
⊙ Yes ⊖ No			
If Yes, in which District	do you work?		
4			
How long have you live	d or worked in Contra Costa	County?	
30 years			
Are you a veteran of the	e U.S. Armed Forces?		
○ Yes ⊙ No			
Board and Interest			
Which Boards would you	u like to apply for?		
	11.7		

African American Holistic Wellness and Resource Hub Transitional Community Advisory

Submit Date: Sep 09, 2025

Jacqueline M Smith

Board: Submitted

Seat Name
Childcare Provider
Have you ever attended a meeting of the advisory board for which you are applying?
⊙ Yes ○ No
If Yes, how many meetings have you attended?
three terms
Education
Select the option that applies to your high school education *
College/ University A
Name of College Attended
Cal State Eastbay
Degree Type / Course of Study / Major
BA/Sociology Minor Women's Studies
Degree Awarded?
⊙ Yes ⊙ No
College/ University B
Name of College Attended
Degree Type / Course of Study / Major
Degree Awarded?
c Yes c No
College/ University C
Name of College Attended
Degree Type / Course of Study / Major
Degree Awarded?
o Yes o No

# Other Trainings & Occupational Licenses Other Training A Circle of Security Parenting Curriculum Certificate Awarded for Training? © Yes © No Other Training B

Abriendo Puertas

**Certificate Awarded for Training?** 

⊙ Yes ○ No

**Occupational Licenses Completed:** 

## **Qualifications and Volunteer Experience**

Please explain why you would like to serve on this particular board, commitee, or commission.

I would like to continue to serve on this particular committee because I am a founding member of the African American Wellness and Holistic Steering Committee. Over the past year, I have given my service wholeheartedly to this work and know that I can continue to be an agent for change. Additionally, I would like to see this service for the African American population in all of Contra Costa County meet it's goal. Moreover, it has been my pleasure and absolute honor to provide feedback and assist with what is already being implemented. I intend to keep this well overdue injustice rectified and let the healing begin. It would be a travesty to not see this vision realized, and I am committed to seeing this Hub for the most harmed citizens in CCC realized. I will continue to offer my time, expertise and life experiences to press on to ensure that the AAHW Hub delivers on the promise to bring this vision to reality.

Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume with this application)

To this appointment I bring over 25 years of service to the communities in Contra Costa County from prenatal-seniors. I have worked as a Community Partnerships Coordinator for over 15 years and have nurtured meaningful partnerships along the way. I am resourceful and very connected to various systems of support throughout the county. Perhaps the most compelling qualification I bring to the table is lived experience as a Black Woman living in Contra Costa County for over 30 years. With this appointment, I bring my professional qualifications working for non-profits since graduating from college, until present working with low-income families throughout Contra Costa County for Head Start. I have over 30 years of volunteering for faith-based organizations in the county as well as the juvenile population and mental health services. I made a personal commitment when I joined the AAHW steering committee one year ago, and will also bring the knowledge gained and continued support I have faithfully given. I intend to be an integral asset to the African American Holistic and Wellness HUB, fo as long as it requires.

Unload a Resume

<b>Would you</b>	like to	be considered	for ap	pointment	to other	advisory	bodies	for
which you	may be	qualified?						

○ Yes ⊙ No

Do you have any obligations that might affect your attendance at scheduled meetings?

o Yes ⊙ No

If Yes, please explain:

Are you currently or have you ever been appointed to a Contra Costa County advisory board?

Yes ○ No

If Yes, please list the Contra Costa County advisory board(s) on which you are currently serving:

I currently serve on the LPC for Early Childhood Education

If Yes, please also list the Contra Costa County advisory board(s) on which you have previously served:

List any volunteer or community experience, including any advisory boards on which you have served.

-Food pantry Coordinator -Young Women's Empowerment Group -Mentor for Youth pre-K-12th grade -CCC LPC

### **Conflict of Interest and Certification**

Do you have a familial or financial relationship with a member of the Board of Supervisors? (Please refer to the relationships listed under the "Important Information" section below or Resolution No. 2021/234)

○ Yes ⊙ No

If Yes, please identify the nature of the relationship:

Do you have any financial relationships with the County such as grants, contracts, or other economic relationships?

○ Yes ⊙ No

## **Please Agree with the Following Statement**

I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge and undersand that all information in this application is publicly accessible. I understand that misstatements and/or omissions of material fact may cause forfeiture of my rights to serve on a board, committee, or commission in Contra Costa County.

# ☑ I Agree

## <u>Important Information</u>

- 1. This application and any attachments you provide to it is a public document and is subject to the California Public Records Act (CA Government Code §6250-6270).
- 2. All members of appointed bodies are required to take the advisory body training provided by Contra Costa County.
- 3. Members of certain boards, commissions, and committees may be required to: (1) file a Statement of Economic Interest Form also known as a Form 700, and (2) complete the State Ethics Training Course as required by AB 1234.
- 4. Meetings may be held in various locations and some locations may not be accessible by public transportation.
- 5. Meeting dates and times are subject to change and may occur up to two (2) days per month.
- 6. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.
- 7. As indicated in Board Resolution 2021/234, a person will not be eligible for appointment if he/she is related to a Board of Supervisors' member in any of the following relationships:
  - (1) Mother, father, son, and daughter;
  - (2) Brother, sister, grandmother, grandfather, grandson, and granddaughter;
  - (3) Husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, stepson, and stepdaughter;
  - (4) Registered domestic partner, pursuant to California Family Code section 297;
  - (5) The relatives, as defined in 1 and 2 above, for a registered domestic partner;
  - (6) Any person with whom a Board Member shares a financial interest as defined in the Political Reform Act (Gov't Code §87103, Financial Interest), such as a business partner or business associate.