

Please return completed applications to:

Clerk of the Board of Supervisors

1025 Escobar Street, 1st Floor

Martinez, CA 94553

or email to: ClerkofTheBoard@cob.cccounty.us

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

Contra

Costa

County

First Name		Last Name				
Home Address - Street	City		7	Zip Code		
			J			
Phone (best number to reach you) Email						
Resident of Supervisorial District:						
EDUCATION Check appropriate box if you possess one of the following:						
□ High School Diploma □] CA High School I	Proficiency Certificate		G.E.D. Certific	ate	
Colleges or Universities Attended	Course of Stud	rse of Study/Major		Degree Awarded		
			□ Yes		No	
			□ Yes		No	
			🗆 Yes		No	
Other Training Completed:						
Board, Committee or Commission Name		Seat Name				
Have you ever attended a meeting of the	advisory board f	or which you are applyi	ng?			
Have you ever attended a meeting of the advisory board for which you are applying?						
Please explain why you would like to serve on this particular board, committee, or commission.						
Describe your qualifications for this appointment. (NOTE: you may also include a copy of						
your resume with this application)						
I am including my resume with this applic	cation:					
Please check one:]Yes 🗆	No				
I would like to be considered for appoint	ment to other ad	visory bodies for which	I may be q	ualified.		
		No	-			

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

🗆 Yes 🛛 No

Please check one:

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

Do you have a familial relationship with a member of the Board of Supervisors?	(Please refer to
the relationships listed below or Resolution no. 2011/55)	
Please check one:	
If Yes, please identify the nature of the relationship:	
Do you have any financial relationships with the county, such as grants, contract	s, or
other economic relationships?	
Please check one:	
If Yes, please identify the nature of the relationship:	
I CERTIFY that the statements made by me in this application are true, complete, a	and correct to the best of my
knowledge and belief, and are made in good faith. I acknowledge and understand	that all information in this
application is publicly accessible. I understand and agree that misstatements and/	or ommissions of material fact may
cause forfeiture of my rights to serve on a board, committee, or commission in Co	ntra Costa County.
Signed:	Date:
Submit this application to: ClerkofTheBoard@cob.cccounty.us OR Clerk of the Boa	ard of Supervisors
1025 Escobar S	
Martinez, CA 94	4553
Questions about this application? Contact the Clerk of the Board at (925)	655-2000 or by email at
ClerkofTheBoard@cob.cccounty.us	
Important Information	
1. This application and any attachments you provide to it is a public document and is subject to the C Code §6250-6270).	alifornia Public Records Act (CA Government

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 2011/55, 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: mother, father, son, daughter, brother, sister, grandmother, grandfather, grandson, granddaughter, great-grandfather, great-grandmother, aunt, uncle, nephew, niece, great-grandson, great-granddaughter, first-cousin, husband, wife, father-in-law, mother-in-law, daughter-in-law, stepson, stepdaughter, sister-in-law, brother-in-law, spouse's grandmother, spouse's grandfather, spouse's gra

8. A person will not be eligible to serve if the person shares a financial interest as defined in Government Code §87103 with a Board of Supervisors Member.