Application Form				
Profile				
Arthur	L	larris		
First Name		ast Name		
Home Address			Suite or Apt	
Hercules			CA	94547
City			State	Postal Code
Primary Phone				
			-	
Email Address				
District Locator Tool				
Resident of Superviso	rial District:			
☑ District 5				
West contra costa unified School District/ Private Practice	Special educ Mental Heal	cation director, th	-	
Employer	Job Title			
Length of Employmen	t			
10 years				
Do you work in Contra	a Costa County?			
⊙ Yes ⊙ No				
If Yes, in which Distri	ct do you work?			
West contra costa county				
How long have you liv	ed or worked in	Contra Costa	County?	
13 years both				
13 years both				
Are you a veteran of t	the U.S. Armed F	orces?		
Yes ○ No				

Submit Date: Sep 06, 2025

Which Boards would you like to apply for?

African American Holistic Wellness and Resource Hub Transitional Community Advisory Board: Submitted

Seat Name

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? **Education** Select the option that applies to your high school education * College/ University A Name of College Attended **National University** Degree Type / Course of Study / Major Administrative Credential clear **Degree Awarded? College/ University B** Name of College Attended Loyola Marymount **Degree Type / Course of Study / Major** Administrative credential **Degree Awarded?** ○ Yes ⊙ No College/ University C Name of College Attended **CSU East Bay**

Arthur Harris

Degree Type / Course of Study / Major

MS Counseling/ school psychologist and marriage and family therapy

Degree Awarded?	
⊙ Yes ⊃ No	
Other Trainings & Occupational Licenses	
Other Training A	
LMFT 78354	
Certificate Awarded for Training?	
⊙ Yes ⊃ No	
Other Training B	
PPS school psychologist	
Certificate Awarded for Training?	
⊙ Yes ⊃ No	
Occupational Licenses Completed:	
LMFT PPS school psychology Administrative credential	
Qualifications and Volunteer Experience	
Please explain why you would like to serve on this particular board, commitee, or commission.	
I want to be a part in supporting the well being of the community I live in and a crucial pa of this is supporting in the healing of the African American community in Contra Costa County.	 rt
Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume with this application)	
As a special education director for mental health, an experienced therapist serving the Contra Costa community, and a member of the Association of Black Psychologists I am an ideal candidate. Also my wife is a LMFT who specializes in Black Maternal Health in her private practice.	
Upload a Resume	
Would you like to be considered for appointment to other advisory bodies to which you may be qualified?	or
⊙ Yes ⊙ No	
Do you have any obligations that might affect your attendance at schedule meetings?	d
⊙ Yes ◌ No	

Arthur Harris

If Yes, please explain:

I have to young children and a day job in the school district. I can be available for meetings but I have to make arrangements in advance.

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:

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.

Current Vice president Bay Area Chapter of the Association of Black Psychologists

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

If Yes, please identify the nature of the relationship:

I am currently a WCCUSD school district employee and I am going to re-establish my contract with contra costa mental health to provide medi-cal services through my private practice.

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.