

For Office Use Only Date Received: For Reviewers Use Only: Accepted Rejected

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

MAIL OR DELIVER TO:
Contra Costa County
CLERK OF THE BOARD
651 Pine Street, Rm. 166
Martinez, California 94553-1292
PLEASE TYPE OR PRINT IN INK
(Each Position Requires a Separate Application)

BOARD, COMMITTEE OR COMMISSION NAME AND SEAT TITLE YOU ARE APPLYING FOR:

Advisory Council on Aging			Representative for the City of Concord					
PRINT EXACT NA	ME OF BOARD, COMMITTEE	, OR COMMISSION	PRINT EXACT SEAT NAME (if applicable)					
1. Name:	Fowler	Mari	lyn		М	iller		
(Last Name)		(First Name)			(N	(Middle Name)		
2. A d	dress: XXXX	74 (M.C.) 2			a Sugar Sassa			
	(No.)	(Street) (A	Apt.)	(State)	Privi		Zip Code)	
3. Phor	nes: XXXXXXX	n/a			ana a saka	See See South and the second of	a dalah da Mara	
	(Home No.)	(Work No.)	(Cell	No.)		System of the contract of the	+ + + + + + + + + + + + + + + + + + +	
High School	Diploma 🗷 G.E.D.	ate box if you possess on Certificate	High School Prot	iciency Cert	ificate			
Names of	colleges / universities attended	Course of Study / Major	Degree Awarded	Units Co	mpleted	Degree Type	Date Degree Awarded	
				Semester	Quarter			
	ssell Sage College	Soc. Sci./El. Ed.	Yes No 🗵			BS	1969	
	den Gate University	Applied Psychology	Yes No 🗵			MA	1996	
C)		A Delay of the Control of the contro	Yes No UU	Annah sa an				
Other schools / training completed: Golden Gate University		Course Studied Conflict Resolution	Hours Completed		Certificate Awarded: Yes No 💌			

6. PLEASE FILL OUT THE FOLLOWING SECTION COMPLETELY. List experience that relates to the qualifications needed to serve on the local appointive body. Begin with your most recent experience. A resume or other supporting documentation may be attached but it may not be used as a substitute for completing this section.

A) Dates (Month, Day, Year)	Title	Duties Performed
From To		I currently serve on the
10/21 Present	Commissioner	Commission on Aging. In that role,
10/21 Present	Employer's Name and Address	I have helped organize and
Total: Yrs. Mos.	City of Concord	implement a senior health fair and
	1950 Parkside Drive	the Be A Santa to a Senior project. Also, I helped analyze the results
1 2	Concord, CA 94519	of a survey of Concord's senior
		citizens. We plan to focus on
Hrs. per week varies . Volunteer		transportation and housing
		concerns, based on the results.
B) Dates (Month, Day, Year)	Title	Duties Performed
From To	N 6 6 7	I mediate disputes between
1/97 Present	Mediator	community members. I specialize
TO TOBOIL	Employer's Name and Address	in mediating contested juvenile guardianship cases for the Probate
Total: Yrs. Mos.	Center for Human Development	Division of the Contra Costa
	901 Sunvalley Blvd. #220	Superior Court. My training and
26	Concord, CA 94520	experience help me to recognize
. varias		the problems caused by
Hrs. per week varies . Volunteer		differences of opinion and to help
		others to work through issues.
C) Dates (Month, Day, Year)	Title	Duties Performed
C) Dates (Month, Day, Year) From To		
From To	Title Varied - see Duties Performed	I served in numerous roles during
	Varied - see Duties Performed	I served in numerous roles during my career beginning with work as a Group Counselor in the Juvenile
<u>From</u> <u>To</u> 1973 3/94	Varied - see Duties Performed Employer's Name and Address	I served in numerous roles during my career beginning with work as a Group Counselor in the Juvenile Hall. Additionally, I was a
<u>From To</u> 1973 3/94 Total: <u>Yrs. Mos.</u>	Varied - see Duties Performed Employer's Name and Address Contra Costa County Probation Dept. 50 Douglas Drive	I served in numerous roles during my career beginning with work as a Group Counselor in the Juvenile Hall. Additionally, I was a Supervisor in the Girls Treatment
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7. How did you learn about this va	icancy?	
CCC Homepage Walk-In	Newspaper Advertise	sement District Supervisor Other Conc. Commission on Aginc
8. Do you have a Familial or Finan Resolution no. 2011/55, attache		th a member of the Board of Supervisors? (Please see Board
If Yes, please identify the nature	e of the relationship:	
belief, and are made in good faith	. I acknowledge and ee that misstatement	olication are true, complete, and correct to the best of my knowledge and understand that all information in this application is publically atts / omissions of material fact may cause forfelture of my rights to serve sta County.
Sign Name:	<i>?</i>	Date: January 20, 2023
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Important Information

- This application is a public document and is subject to the California Public Records Act (CA Gov. Code §6250-6270).
- Send the completed paper application to the Office of the Clerk of the Board at: 651 Pine Street, Room 106, Martinez, CA 94553.
- 3. A résumé or other relevant information may be submitted with this application.
- 4. All members are required to take the following training: 1) The Brown Act, 2) The Better Government Ordinance, and 3) Ethics Training.
- 5. Members of 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.
- 6. Advisory body meetings may be held in various locations and some locations may not be accessible by public transportation,
- 7. Meeting dates and times are subject to change and may occur up to two days per month.
- 8. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.

THE BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY, CALIFORNIA and for Special Districts, Agencies and Authorities Governed by the Board Adopted Resolution no. 2011/55 on 2/08/2011 as follows:

IN THE MATTER OF ADOPTING A POLICY MAKING FAMILY MEMBERS OF THE BOARD OF SUPERVISORS INELIGIBLE FOR APPOINTMENT TO BOARDS, COMMITTEES OR COMMISSIONS FOR WHICH THE BOARD OF SUPERVISORS IS THE APPOINTING AUTHORITY

WHEREAS the Board of Supervisors wishes to avoid the reality or appearance of improper influence or favoritism; NOW, THEREFORE, BE IT RESOLVED THAT the following policy is hereby adopted:

- I. SCOPE: This policy applies to appointments to any seats on boards, committees or commissions for which the Contra Costa County Board of Supervisors is the appointing authority.
- II. POLICY: 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. Great-grandfather, great-grandmother, aunt, uncle, nephew, niece, great-grandson, and great-granddaughter;
- 4. First cousin;
- 5. Husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, stepson, and stepdaughter;
- 6. Sister-in-law (brother's spouse or spouse's sister), brother-in-law (sister's spouse or spouse's brother), spouse's grandmother, spouse's granddaughter, and spouse's grandson;
- 7. Registered domestic partner, pursuant to California Family Code section 297.
- 8. The relatives, as defined in 5 and 6 above, for a registered domestic partner.
- 9. 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.