

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

First Name	Middle Initial	Last Name		
Home Address - Street	City		State	Postal Code
Primary Phone (best number to reach you) Email Address				
Resident of Supervisorial District (if out of County, please enter N/A): District Locator Tool				
Do you work in Contra Costa County? Yes No If Yes, in which District do you work?				
Current Employer	Job Title		Length o	of Employment
How long have you lived or worked in Contra Costa County?				
Board, Committee, or Commission		Seat Name		
Have you ever attended a meeting of the advis Pease check one: Yes	•	you are applying	;?	
EDUCATION				
Check appropriate box if you possess one of the	e following:			
High School Diploma CA High	n School Proficiency	Certificate	G.E	D. Certificate
Colleges or Universities Attended De	gree Type/ Course of	Study/Major	Degree Award	led
			Yes	No
			Yes	No
			Yes	No
Occupational Licenses Completed:				
				varded for Training?
Other Trainings Completed:			Yes	No
			Yes	No
Do you have any obligations that might affect your attendance at scheduled meetings? $_{\text{Yes}}$ $_{\text{No}}$ If Yes, please explain:				
Would you like to be considered for appointment to other advisory bodies for which you may be qualified? Yes No				

THIS FORM IS A PUBLIC DOCUMENT

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No

Are you a veteran of the U.S. Armed Forces? Yes

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 convert your resume)		
Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume).		
I am including my resume with this application:		
Please check one: Yes No		
Thease areas		
Are you currently or have you ever been appointed to a Contra Costa County advisory board?		
Please check one: 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 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 under the "Important Information" section on page 3 of this application or Resolution No. 2021/234).		
Please check one: 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?		
Please check one: Yes No		
If Yes, please identify the nature of the relationship:		

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 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 Contra Costa County.

Signed:	any M'Lyne	Date:
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Submit this application to: ClerkofTheBoard@cob.cccounty.us OR Clerk of the Board
1025 Escobar Street, 1st Floor
Martinez, CA 94553

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 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.