

## Please return completed applications to:

Clerk of the Board of Supervisors 1025 Escobar Street, 1st Floor Martinez, CA 94553

 $or\ email\ to:\ Clerk of The Board @cob.cccounty.us$ 

## **BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION**

First Name	Middle Initial Last Name		
Rohana	Moore		
Home Address - Street	City State Postal Code		
	Antioch CA 94509		
Primary Phone (best number to reach you)	Email Address		
Resident of Supervisorial District (if out of County, please enter N/A): 5  District Locator Tool			
Do you work in Contra Costa County?  Yes	☐ No If Yes, in which District do you work? 4		
Current Employer	Job Title Length of Employment		
CA Department of Rehabilitation	CA Department of Rehabilitation 9 months		
How long have you lived or worked in Contra Costa County?			
Board, Committee, or Commission	Seat Name		
n/a	n/a		
Have you ever attended a meeting of the advis	sory board for which you are applying?		
Pease check one: Yes	✓ No If Yes, how many? n/a		
EDUCATION			
Check appropriate box if you possess one of the	ne following:		
Check appropriate box if you possess one of the	gh School Proficiency Certificate G.E.D. Certificate		
Check appropriate box if you possess one of the  ☐ High School Diploma ☐ CA High	sh School Proficiency Certificate G.E.D. Certificate		
Check appropriate box if you possess one of the  ☐ High School Diploma ☐ CA High	sh School Proficiency Certificate G.E.D. Certificate		
Check appropriate box if you possess one of the  ☐ High School Diploma ☐ CA Hig  Colleges or Universities Attended ☐ De	gh School Proficiency Certificate  G.E.D. Certificate  egree Type/ Course of Study/Major  Degree Awarded		
Check appropriate box if you possess one of the  ☐ High School Diploma ☐ CA Hig  Colleges or Universities Attended ☐ De	egree Type/Course of Study/Major Human Resource Management  G.E.D. Certificate  Degree Awarded  V Yes  No		
Check appropriate box if you possess one of the  ☐ High School Diploma ☐ CA Hig  Colleges or Universities Attended ☐ De	gh School Proficiency Certificate  G.E.D. Certificate  Gree Type/ Course of Study/Major  Human Resource Management  Yes  No  Yes		
Check appropriate box if you possess one of the High School Diploma CA Hig Colleges or Universities Attended De U.C. Berkeley Extension	gh School Proficiency Certificate  G.E.D. Certificate  Gree Type/ Course of Study/Major  Human Resource Management  Yes  No  Yes		
Check appropriate box if you possess one of the High School Diploma CA Hig Colleges or Universities Attended De U.C. Berkeley Extension  Occupational Licenses Completed:	egree Type/ Course of Study/Major  Human Resource Management  Yes  No  Yes  No  Yes  No		
Check appropriate box if you possess one of the High School Diploma CA Hig Colleges or Universities Attended De U.C. Berkeley Extension	ch School Proficiency Certificate    G.E.D. Certificate   G.E.D. Certificate   G.E.D. Certificate   G.E.D. Certificate   G.E.D. Certificate   G.E.D. Certificate		
Check appropriate box if you possess one of the High School Diploma CA Hig Colleges or Universities Attended De U.C. Berkeley Extension  Occupational Licenses Completed:	ch School Proficiency Certificate    G.E.D. Certificate   G.E.D. Certificate   G.E.D. Certificate   G.E.D. Certificate   G.E.D. Certificate   G.E.D. Certificate   G.E.D. Certificate		
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Check appropriate box if you possess one of the High School Diploma CA Hig Colleges or Universities Attended De U.C. Berkeley Extension  Occupational Licenses Completed:	ch School Proficiency Certificate    G.E.D. Certificate   G.E.D. Certifi		
Check appropriate box if you possess one of the High School Diploma CA Hig Colleges or Universities Attended De U.C. Berkeley Extension  Occupational Licenses Completed:  Other Trainings Completed:	ch School Proficiency Certificate    G.E.D. Certificate   G.E.D. Certifi		
Check appropriate box if you possess one of the High School Diploma CA Hig Colleges or Universities Attended De U.C. Berkeley Extension  Occupational Licenses Completed:  Other Trainings Completed:  Do you have any obligations that might affect y If Yes, please explain:  n/a	ch School Proficiency Certificate    G.E.D. Certificate   G.E.D. Certifi		

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Please e	xplain why you would like to serve on this particular board, committee, or commission.
menta Antioc for nea	Iterested in serving on this particular board to offer recommendations of holistic and I health needs from the perspective of a Contra Costa ]County (and more specifically an h CA) resident. As a resident of the 94509 area code, District 5 of Contra Costa County arly 2 decades, I would like to advocate for holistic wellness and accessibility and ng of our community.
Describe	your qualifications for this appointment. (NOTE: you may also include a copy of your resume).
	successfully experienced holistic wellness support and resources provided by bay area ion centers of the 1980's.
	had the benefit of accessing resources committed to mental health well being and tand what access and resources may include.
self awayears)	training and leadership experience from previous positions have prepared me to consider areness in leadership and communication. My previous role as a call center supervisor (18 has trained me to develop and coach a diverse audience from the Silent Generation to ation Z, to respect people of all abilities, and to advocate equal treatment for everyone.
	uding my resume with this application: lease check one: Yes V No
re vou cu	irrently or have you ever been appointed to a Contra Costa County advisory board?
	ease check one: Yes Vo
	es, please list the Contra Costa County advisory board(s) on which you are currently serving:
n/	
	Yes, please also list the Contra Costa County advisory board(s) on which you have <b>previously</b> served:
n/	'a
st anv vo	lunteer and community experience, including any boards on which you have served.
nnual C	Church: Food outreach ministry serving those experiencing food insecurity Community Support Month at Wells Fargo 2003 - 2021 (Socks and Undergarment er for the unhoused, the Crayon initiative, Cards for Kids
	we a familial relationship with a member of the Board of Supervisors? (Please refer to the relationships or the "Important Information" section on page 3 of this application or Resolution No. 2021/234).
Ple	ease check one: 🗌 Yes 📝 No
If Y	es, please identify the nature of the relationship: n/a
you hav	e any financial relationships with the county, such as grants, contracts, or other economic relationships?
	ease check one: Yes No Yes, please identify the nature of the relationship: n/a

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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: Date: 09/06/2023

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.