



Contra Costa County

Print Form

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: Francisco, Middle Initial: , Last Name: Benavides, Home Address - Street: , City: Moraga, State: CA, Postal Code: 94556, Primary Phone: , Email Address: , Resident of Supervisorial District: 2, District Locator Tool, Do you work in Contra Costa County? Yes, Job Title: Chief Safety Officer, Length of Employment: 2.7 years, How long have you lived or worked in Contra Costa County? 4 yrs

Board, Committee, or Commission: Advisory Council on Aging, Seat Name: Moraga ACOA representative, Have you ever attended a meeting of the advisory board for which you are applying? No

EDUCATION

Check appropriate box if you possess one of the following:

- High School Diploma, CA High School Proficiency Certificate, G.E.D. Certificate

Table with 3 columns: Colleges or Universities Attended, Degree Type/ Course of Study/Major, Degree Awarded. Rows include Oklahoma State University, West Virginia University, and Universidad de Costa Rica.

Occupational Licenses Completed: , Other Trainings Completed: , Certificate Awarded for Training? Yes/No

Do you have any obligations that might affect your attendance at scheduled meetings? No, If Yes, please explain:

Would you like to be considered for appointment to other advisory bodies for which you may be qualified? Yes

Are you a veteran of the U.S. Armed Forces? No

Please explain why you would like to serve on this particular board, committee, or commission.

I've finally found the time to serve my community and give something back, for the privilege to live in such a fantastic county. My career as a global environmental, health and safety executive has prepared me well to contribute to this position, since I have substantial training and experience in health matters, including aging.

Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume).

I've spent three decades working in various industries around the world, in some of the safest, healthiest companies. I've had to propose and implement strategies to reduce and prevent occupational illnesses and to address the challenges of an aging workforce. I also happen to be very passionate about healthy aging in general, have read substantially about the topic, and consider myself a positive example. I have mature planning, strategic, and organizational skills and I look forward to use them in support of ACOA. If submission of my resume is required, please let me know and I'll be happy to forward it.

I am including my resume with this application:

Please check one: Yes No

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.

- Children's International Summer Villages
- Habitat for Humanity
- Alliance Community Services

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 omissions of material fact may cause forfeiture of my rights to serve on a board, committee, or commission in Contra Costa County.

Signed: Francisco Benavides

Date: 03/04/2024

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.