



**MEMORANDUM**

DATE: April 12, 2016

TO: Family and Human Services Committee  
Supervisor Candace Andersen, District II, Chair  
Supervisor Federal D. Glover, District V, Vice Chair

Contra Costa County Office of Education  
Karen Sakata, Contra Costa County Superintendent of Schools  
Dr. Pamela Comfort, Deputy Superintendent of Schools

FROM: Ruth Fernández, LPC Coordinator/Manager, Educational Services

SUBJECT: Referral #25 – LPC APPOINTMENTS  
Contra Costa County Local Planning and Advisory Council for Early Care and Education (LPC)

**RECOMMENDATION(S):**

1) **RE-APPOINT** the following members to the Contra Costa Local Planning and Advisory Council for Early Care and Education, as recommended by the LPC:

<u>Name</u>	<u>Seat</u>	<u>Area</u>
Luis Arenas	Child Care Provider 3	Central/South County
Joan Means	Public Agency 3	Central/South County
Deborah Penry	Community Agency 2	Central/South County
Janeen Rockwell-Owens	Community Agency 4	East County
Aurora Ruth	Discretionary 4	Central/South County

**REASON/S FOR RECOMMENDATION:**

The Contra Costa County Local Planning Council for Child Care and Development (LPC) was established in April 1998. Required by AB 1542, which was passed in 1993, thirty members of the LPC were appointed by the County Board of Supervisors and the County Superintendent of Schools. Childcare consumers and providers, public agency representatives, and community representatives each comprise 20% of the LPC. The remaining 20% are discretionary appointees. Membership is for a three-year term. On January 7, 2003, membership was decreased from 30 to 25 members, due to the difficulty being experienced in filling all of the seats.

On September 19, 2012 membership was decreased from 25 to 20, due to continued difficulty to fill vacant seats. Official reduction of appointed seats provides flexibility to ensure quorum is met in order to conduct Council business.

Membership consists of the following:

- Four consumer representatives - a parent or person who receives or has received child care services in the past 36 months;

- Four child care providers - a person who provides child care services or represents persons who provide child care services;
- Four public agency representatives - a person who represents a city, county, city and county, or local education agency;
- Four community representatives - a person who represents an agency or business that provides private funding for child care services or who advocates for child care services through participation in civic or community based organizations;
- Four discretionary appointees - a person appointed from any of the above four categories or outside of those categories at the discretion of the appointing agencies.

Appointments to the Contra Costa County Local Planning and Advisory Council for Early Care and Education (LPC) are subject to the approval of the Board of Supervisors and County Superintendent of Schools, Dr. Joseph Ovick. The Board of Supervisors designated the Family and Human Services Committee to review and recommend appointments on their behalf. Dr. Pamela Comfort, Associate Superintendent, Educational Services has been designated to review and recommend appointments on behalf of the County Superintendent of Schools.

Letter of Interest  
Re: LPC Reappointment

4/11/2016

I am interested in being re-appointed to the Contra Costa Local Planning and Advisory Council for Early Care and Education. I believe that there is still much work to be done in Contra Costa County and that I will be able to contribute to the discussion. The work that the LPC does on a regular basis has benefited providers and children in the County and I hope to be able to not only contribute to it, but also as a provider, be a recipient of its work.

---

Luis Arenas  
Child Care Provider 3---Central/South County





Contra  
Costa  
County

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. 106  
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:

Local Planning & Advisory Council For Early Care & Education      Child Care Provider 3 - Central/South

PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION

PRINT EXACT SEAT NAME (if applicable)

1. Name: Arenas, Luis Felipe  
(Last Name) (First Name) (Middle Name)

2. Address: Concord CA 94520  
(No.) (Street) (Apt.) (City) (State) (Zip Code)

3. Phones: \_\_\_\_\_  
(Home No.) (Work No.) (Cell No.)

4. Email Address: \_\_\_\_\_

5. EDUCATION: Check appropriate box if you possess one of the following:

High School Diploma  G.E.D. Certificate  California High School Proficiency Certificate

Give Highest Grade or Educational Level Achieved MA in Education

Names of colleges / universities attended	Course of Study / Major	Degree Awarded	Units Completed		Degree Type	Date Degree Awarded
			Semester	Quarter		
A) University of Massachusetts	Public Policy	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>	36		MPP	05/2014
B) San Francisco State University	Education	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>	33		MA	05/2010
C) Patten University	Musc	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>	120		BA	05/2007
D) Other schools / training completed:	Course Studied	Hours Completed			Certificate Awarded: Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>	
UCLA Anderson School of Mana	Management	88				



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.

<p>A) Dates (Month, Day, Year)            From <u>          </u> To <u>          </u>            05/2013 PRESENT            Total: Yrs. <u>          </u> Mos. <u>          </u>            2 11            Hrs. per week <u>40</u> . Volunteer <input type="checkbox"/></p>	<p>Title            Deputy Director            Employer's Name and Address            THE UNITY COUNCIL            1187 MEADOW LANE            CONCORD CA 94520</p>	<p>Duties Performed            OVERSEE DAY TO DAY OPERATIONS OF HEAD START PROGRAM IN MONUMENT SECTION OF CONCORD.</p>
<p>B) Dates (Month, Day, Year)            From <u>          </u> To <u>          </u>            10/2010 08/2012            Total: Yrs. <u>          </u> Mos. <u>          </u>            1 10            Hrs. per week <u>40</u> . Volunteer <input type="checkbox"/></p>	<p>Title            NATIONAL HEAD START FELLOW            Employer's Name and Address            OFFICE OF HEAD START            1250 MARYLAND AVE SW            WASHINGTON DC 20010</p>	<p>Duties Performed            WORKED WITH OHS DIRECTOR ON HISPANIC INITIATIVE, WORKED WITH STATE INITIATIVES DIVISION</p>
<p>C) Dates (Month, Day, Year)            From <u>          </u> To <u>          </u>            06/2008 09/2010            Total: Yrs. <u>          </u> Mos. <u>          </u>            2 4            Hrs. per week <u>          </u> . Volunteer <input type="checkbox"/></p>	<p>Title            RECORD KEEPING &amp; REPORTING COORD.            Employer's Name and Address            THE UNITY COUNCIL            1155 35TH AVE            OAKLAND CA 94601</p>	<p>Duties Performed            MANAGED HEAD START GRANTS, CONTRACTS AND MANAGED ON-GOING MONITORING ACTIVITIES</p>
<p>D) Dates (Month, Day, Year)            From <u>          </u> To <u>          </u>            08/2007 06/2008            Total: Yrs. <u>          </u> Mos. <u>          </u>  <u>          </u> 9            Hrs. per week <u>40</u> . Volunteer <input type="checkbox"/></p>	<p>Title            PARENT INVOLVEMENT ASSISTANT            Employer's Name and Address            THE UNITY COUNCIL HEAD START            1155 35TH AVE            OAKLAND CA 94601</p>	<p>Duties Performed            WORKED WITH PARENT INVOLVEMENT STAFF ON SETTING UP WORKSHOPS FOR PARENTS, MANAGING CALENDAR AND OTHER FAMILY ENGAGEMENT PROJECTS</p>

7. How did you learn about this vacancy?

CCC Homepage  Walk-In  Newspaper Advertisement  District Supervisor  Other RUTHE FERNANDEZ

8. Do you have a Familial or Financial Relationship with a member of the Board of Supervisors? (Please see Board Resolution no. 2011/55, attached): No  Yes

If Yes, please identify the nature of the relationship:

9. Do you have any financial relationships with the County such as grants, contracts, or other economic relations? No  Yes

If Yes, please identify the nature of the relationship: Fist 5 Contract for occasional assessments

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 publically accessible. I understand and agree that misstatements / omissions of material fact may cause forfeiture of my rights to serve on a Board, Committee, or Commission in Contra Costa County.

Sign Name: \_\_\_\_\_

Date: \_\_\_\_\_

4-10-16

### Important Information

1. This application is a public document and is subject to the California Public Records Act (CA Gov. Code §6250-6270).
2. 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 grandfather, 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.



Contra Costa County  
Local Planning and Advisory Council  
for Early Care and Education

**APPLICATION FOR MEMBERSHIP**

Name: Luis Felipe Arenas Jr.  
 Home Address: \_\_\_\_\_ City: Vallejo Zip: 94591  
 Business/Agency/Affiliation: The Unity Council  
 Address: 1187 Meadow Ln City: Concord Zip: 94520  
 Type of Organization: Child Care Position: Deputy Director  
 Day Phone: ( \_\_\_\_\_ ) FAX: ( \_\_\_\_\_ ) Email: \_\_\_\_\_

**A. CATEGORIES FOR APPOINTMENT**

The County Board of Supervisors and the Superintendent of Schools make appointments to the Early Care and Education Planning Council. Members must live or work in Contra Costa County. Twenty percent of the Planning Council members are to be drawn from each of the following categories described below: Child Care Consumer, Child Care Provider, Community Representative, Public Agency Representative, and All Other. Please indicate which categories you could represent.

**1. Consumer of Child Care Services** - using childcare or have used it within the past 36 months.  
 Are you currently utilizing Child Care?  Yes  No Date you last used it: \_\_\_\_\_  
 Type of Care: \_\_\_\_\_ Location: \_\_\_\_\_  
 Length of Time as a Consumer: \_\_\_\_\_

**2. Child Care Provider**- please check the types of care you provide and note the number of children:

_____ Licensed family care provider	# of children licensed for _____
_____ <input checked="" type="checkbox"/> Licensed & publicly funded child care center	# of children licensed for <u>95</u>
_____ Licensed, private for profit, or private non-profit child care center	# of children licensed for _____
_____ Subsidized Child Care Program	# of children licensed for _____
_____ License exempt child care provider	# of children cared for _____

Location of your facility: 1187 Meadow Ln Program/Center Name: Cesar Chavez  
Concord, CA 94520 Head Start Program

**3. Community Representative:** Includes civic or community based agencies or business that advocate for child care but do NOT provide child care or contract with the California Department of Education to provide child care and developmental services.

Organization: \_\_\_\_\_ Service Provided: \_\_\_\_\_  
 Location: \_\_\_\_\_ Service Area: \_\_\_\_\_

**4. Public Agency Representative** - Including city, county and local education agencies.  
 Agency: \_\_\_\_\_ Service Area: \_\_\_\_\_

**5. All Other**- Please describe:  
 \_\_\_\_\_  
 \_\_\_\_\_



**B. GEOGRAPHIC, ETHNIC, AND CULTURAL DIVERSITY REPRESENTATION**

CalWORKS legislation AB 1542 (Education Code 8499.3 d) states, "Every effort shall be made to ensure that the ethnic racial, and geographic composition of the local planning council is reflective of the ethnic, racial, and geographic distribution of the population of the county"

Please indicate your ethnic origin: \_\_\_\_\_ Which region of the County would you represent: \_\_\_\_\_

- White (non-Hispanic)
- Black (Includes African, Jamaican, Trinidad and West Indian)
- Hispanic (includes Mexican, Puerto Rican Cuban, Latin American or Spanish)
- Asian or Pacific Islander (includes Pakistani, East Indian, Japanese, Tongan, Filipino, Laotian, or Vietnamese)
- American Indian or Alaskan Native (includes persons who identify themselves or are known as such by virtue or tribal association)
- Other \_\_\_\_\_

**C. CURRENT COUNCIL INVOLVEMENT:**

Are you currently an active participant on a Council Committee? \_\_\_ No  Yes  
Which Committee: Facilities What is your participation? Chair

**D. INTERESTS:** Personal/Professional areas of interest/experience/skills that could benefit the Council:

Policy, Books, Movies, music

I am interested in becoming a Council representative because: I want to help further the conversation about child care in our community & how we can provide better support.

**E. MEMBER RESPONSIBILITIES:** Members are expected to attend regular meetings on the fourth Monday of July, September, November, January, March, and May from 3:00 p.m. to 5:00 p.m. and participate in at least one committee. Additional meetings may be scheduled for training and council business.

Are you able to commit to regular participation, given this schedule:  Yes \_\_\_\_\_ No

If needed, do you have the support of your agency/employer to be an active member of the Council?  Yes \_\_\_\_\_ No

**F. How did you hear about the Planning Council?**

Attended LPC meeting

Please attach your resume and a letter of interest with this application. Mail completed application, resume and letter of interest to the Contra Costa County Local Planning and Advisory Council (LPC) Coordinator at the Contra Costa County Office of Education, 77 Santa Barbara Road, Pleasant Hill, CA 94523.

For more information please call the LPC Coordinator at (925) 942-3413.

Signature: \_\_\_\_\_ Date: 4-10-16

## Luis Arenas

Tallejo, CA 94591

### EDUCATION & TRAINING

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#### ***Master of Public Policy***

University of Massachusetts Dartmouth, 2014

#### ***Master of Arts, Education***

San Francisco State University, 2010

#### ***Bachelor of Arts, Music Education***

Patten University, 2007

#### ***UCLA Johnson & Johnson Head Start Management Fellows Program***

UCLA, 2014

### EXPERIENCE

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#### ***Deputy Director, Children and Family Services***    *May 2013 to Present*

**The Unity Council**, Concord, CA-

- Establish, oversee, supervise, direct, and coordinate agency's new Head Start and Early Head Start operations throughout Contra Costa County ensuring that all program goals and objectives are met;
- Maintain ongoing communication with two child-care partner programs;
- Monitor all Head Start service areas including supervision of Education, Health, & Family/Community Engagement, ERSEA managers;
- Monitor to ensure compliance of program activities with regulations and standards established by regulatory agencies including OHS and CA Department of Education;
- Actively support parent participation throughout the region
- As a key management member, regularly participate and contribute in program planning and decision making;
- Communicate regularly with the Head Start and Early Head Start Program agency staff regarding the needs of children, families, and employees to ensure quality services;
- Oversee the development of \$3 million budgets for assigned area and have primary responsibility for monitoring appropriate implementation;
- Develop public relations and community resources that promote the Agency/Programs as a valuable service organization and resource at the local, state and national levels;
- Coordinate and supervise the Head Start and Early Head Start programs;
- Ensure on-time completion of Head Start refunding application including the development of budget and budget narrative;
- Provide liaison with local, regional, and national Head Start and early childhood agencies as representative and information recipient;

#### ***Head Start Federal CLASS Reviewer***    *October 2012 to Present*

**Danya International**, Silver Spring, MD-

Conduct CLASS observations for Head Start programs across the country. Submit report of final CLASS scores to OHS central office.

#### ***National Head Start Fellow***    *October 2010 to July 2012*

**Office of Head Start**, Washington, DC -

Selected from a national pool of applicants for a fellowship with the Office of Head Start. Worked with the Office of Head Start's National Center on Cultural and Linguistic Responsiveness on policy issues in Head Start programs affecting children in early childhood programs of diverse backgrounds and children speaking languages other than English. Worked in the Office of the Director and the State Initiative's Office on issues regarding policy



implementation and dissemination at the federal and state level. Maintained communication network with the 50 Head Start State Collaboration Offices and served as a liaison between states and OHS.

- Serve as lead for the OHS Hispanic Initiative, which provides current data on the state of Hispanic children and families in Regional and Migrant Head Start/Early Head Start programs
- Provide report on CLASS results for Migrant/Seasonal programs for OHS Region 12
- Perform regular on-site Federal review's of Head Start grantees
- Develop training webinars for new Head Start State Collaboration Directors focusing on QRIS development
- Serve as member of interagency workgroup between the Department of Education and the Department of Health & Human Services on creating Common Education Data Systems
- Conduct analysis of Head Start monitoring reviewer notes in the areas of culture and language and provide recommendations for reviewers when visiting a program
- Serve as a member of the OHS Federal Learning Lab team focusing on monitoring
- Conduct analysis of tools used across Head Start grantees that support dual language learners
- Coordinate quarterly meetings for State Head Start directors including planning for travel and housekeeping

**Record Keeping & Reporting Coordinator**

*May 2008 to October 2010*

**The Spanish Speaking Unity Council, Oakland, Ca -**

- Submitted grant application renewal for Head Start and Early Head Start programs
- Coordinated and presented month end and periodic reports for grant reporting, desk top review and for Policy Council/Board of Directors meetings
- Assisted director in balancing program budget for agency's early childhood programs including Head Start, Early Head Start and State-funded Pre-K
- Successfully wrote application for Head Start e-Rate program, saving over \$65,000 in telecommunication costs;
- Communicated with Head Start grantee specialist on performance monitoring and reviews
- Served as the lead for program self-assessment and ongoing monitoring processes
- Created and submitted Self-assessment reports to Head Start regional office
- Created program implemented results of program needs assessment, and created strategic plan for early childhood programs

**Assistant Parent Involvement Coordinator**

*September 2007 to May 2008*

**The Spanish Speaking Unity Council, Oakland, Ca -**

Supported the Parent Involvement Coordinator in developing and creating curriculum for parent education workshops, coordinated parent volunteer activities, and conducted monthly parent Policy Council meetings.

- Provided translation and interpretation services for all communications to parents and community members
- Created agenda for Policy Council meetings
- Worked with PC Chair and program Director in setting agenda for Policy Council;
- Collected and calculated Non-federal share for grant and budget reports
- Communicated with outside community partners for participation in parent education and activities.
- Represented the agency's early childhood programs at stakeholder meetings and city-wide community forums

**ADDITIONAL SKILLS**

- 
- Computer literate in both Windows and Mac operating systems. Strong familiarity with MS Office programs including Outlook, Word, Excel and PowerPoint
  - Fluent in Spanish (native speaker)
  - Strong knowledge of cultural and linguistic issues facing minority children in early childhood programs.
  - Familiarity with public government agencies, non-profit organizations and local community businesses.
  - Served as a federal reviewer for grants. This included paneling and scoring grant applications for the US Department of Health & Human Services including the Office of Head Start and the Children's Bureau

## COMMUNITY SERVICE

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**Grant Coordinator/Fund Raiser**      *2009 to 2011*

**Project WeHOPE**, East Palo Alto, CA.

- Served as lead grant coordinator, seeking out community based grants for start-up multi-purpose organization designed to improve the lives of low-income minority youth in the San Francisco Bay Area
- Co-led fundraising events for organization, assisted in planning annual fundraising banquet, and wrote letters of support to potential donors

**Volunteer**      *2005 to 2007*

**AmeriCorps**, Oakland, CA.

- Completed over 1,500 hours of community service in East Oakland
- Coordinated the Volunteer Income Tax Assistance Project that helped over 1,000 low-income families in Oakland receive more than \$750,000 in earned income tax credits, managed a team of AmeriCorps members
- Participated in community service projects with Oakland Parks and Recreation
- Assisted, mentored, and guided individuals seeking employment

**Board Member**      *April 2014-Present*

**Contra Costa Local Planning & Advisory Council for Early Care & Education**, Pleasant Hill, CA.

- Serve on School Readiness and Advocacy committee. Chair of Facilities ADHOC Committee

REFERENCES AVAILABLE UPON REQUEST



Contra Costa County Board of Supervisors  
651 Pine Street Rm106  
Martinez, CA 94553

April 11, 2016

Dear Supervisors:

This letter is to inform you of my continuing interest in serving as a Local Planning Council member for Contra Costa County.

I began serving on this committee when it was initially formed and have been active on several subcommittees over the years including Advocacy, Membership and Professional Development. I feel my knowledge and participation is an asset to the work being done and I would very much like to continue to be involved.

Attached please find requested applications and a current resume.

Thank you for your consideration.

Sincerely,

Joan M. Means



Contra  
Costa  
County

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. 106  
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:

LOCAL PLANNING COUNCIL \_\_\_\_\_  
PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION PRINT EXACT SEAT NAME (if applicable)

1. Name: MEANS JOAN MARY  
(Last Name) (First Name) (Middle Name)

2. Address: \_\_\_\_\_ PLEASANT HILL CA 94523  
(No.) (Street) (Apt.) (City) (State) (Zip Code)

3. Phones: \_\_\_\_\_  
(Home No.) (Work No.) (Cell No.)

4. Email Address: \_\_\_\_\_

5. EDUCATION: Check appropriate box if you possess one of the following:

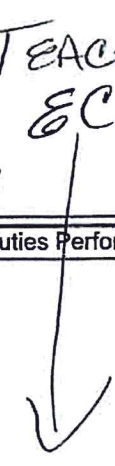
High School Diploma  G.E.D. Certificate  California High School Proficiency Certificate

Give Highest Grade or Educational Level Achieved: MS DEGREE

Names of colleges / universities attended	Course of Study / Major	Degree Awarded	Units Completed		Degree Type	Date Degree Awarded
			Semester	Quarter		
A) <u>UC DAVIS</u>	<u>CHILD DEV</u>	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>			<u>BS</u>	<u>12/1969</u>
B) <u>SYRACUSE U.</u>	<u>ECE</u>	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>			<u>MS</u>	<u>8/1971</u>
C) _____	_____	Yes No <input type="checkbox"/> <input type="checkbox"/>				
D) Other schools / training completed: _____	Course Studied _____	Hours Completed _____	Certificate Awarded: Yes No <input type="checkbox"/> <input type="checkbox"/>			



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 <u>8/01</u> To <u>CURRENT</u> Total: Yrs. <u>16</u> Mos. <u>—</u> Hrs. per week <u>15</u> . Volunteer <input type="checkbox"/>	ADJUNCT FACULTY Employer's Name and Address DIABLO VALLEY COLLEGE 3021 GOLF COURSE RD PLEASANT HILL, CA 94503	TEACHING ECE
B) Dates (Month, Day, Year) From <u>6/05</u> To <u>12/15</u> Total: Yrs. <u>10</u> Mos. <u>6</u> Hrs. per week <u>15</u> . Volunteer <input type="checkbox"/>	ADJUNCT FACULTY Employer's Name and Address SOZANO C.C. 4000 SILVER STAR RD FAIRFIELD, CA	
C) Dates (Month, Day, Year) From <u>4/95</u> To <u>6/02</u> Total: Yrs. <u>6</u> Mos. <u>10</u> Hrs. per week <u>40</u> . Volunteer <input type="checkbox"/>	DIRECTOR Employer's Name and Address CLAYTON CHILDREN'S CRT MARSH CREEK RD CLAYTON, CA	
D) Dates (Month, Day, Year) From <input type="text"/> To <input type="text"/> Total: Yrs. <input type="text"/> Mos. <input type="text"/> Hrs. per week <input type="text"/> . Volunteer <input type="checkbox"/>	Title <input type="text"/> Employer's Name and Address <input type="text"/>	Duties Performed <input type="text"/>



7. How did you learn about this vacancy?

CCC Homepage  Walk-In  Newspaper Advertisement  District Supervisor  Other Continuing

8. Do you have a Familial or Financial Relationship with a member of the Board of Supervisors? (Please see Board Resolution no. 2011/55, attached): No  Yes

If Yes, please identify the nature of the relationship: \_\_\_\_\_

9. Do you have any financial relationships with the County such as grants, contracts, or other economic relations? No  Yes

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 publically accessible. I understand and agree that misstatements / omissions of material fact may cause forfeiture of my rights to serve on a Board, Committee, or Commission in Contra Costa County.

Sign Name: \_\_\_\_\_ Date: 4-11-2016

### Important Information

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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 grandfather, 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.



**APPLICATION FOR MEMBERSHIP/Form B**

Name: JOAN M. MEATS  
 Home Address: \_\_\_\_\_ City: PLEASANT HILL Zip: 94523  
 Business/Agency/Affiliation: DIABLO VALLEY COLLEGE  
 Address: 321 GOLF CLUB RD City: P.A. Zip: 94523  
 Type of Organization: EDUCATION Position: FACULTY  
 Day Phone: \_\_\_\_\_ X:( ) \_\_\_\_\_ Email: \_\_\_\_\_

**A. CATEGORIES FOR APPOINTMENT**

The County Board of Supervisors and the Superintendent of Schools make appointments to the Early Care and Education Planning Council. Members must live or work in Contra Costa County. Twenty percent of the Planning Council members are to be drawn from each of the following categories described below: Child Care Consumer, Child Care Provider, Community Representative, Public Agency Representative, and All Other. Please indicate which categories you could represent.

- 1. Consumer of Child Care Services** - using childcare or have used it within the past 36 months.  
 Are you currently utilizing Child Care? \_\_\_ Yes  No Date you last used it: \_\_\_\_\_  
 Type of Care: \_\_\_\_\_ Location: \_\_\_\_\_  
 Length of Time as a Consumer: \_\_\_\_\_
  
- 2. Child Care Provider**- please check the types of care you provide and note the number of children:  

_____ Licensed family care provider	# of children licensed for _____
_____ Licensed & publicly funded child care center	# of children licensed for _____
_____ Licensed, private for profit, or private non-profit child care center	# of children licensed for _____
_____ Subsidized Child Care Program	# of children licensed for _____
_____ License exempt child care provider	# of children cared for _____

  
 Location of your facility: \_\_\_\_\_ Program/Center Name: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
- 3. Community Representative:** Includes civic or community based agencies or business that advocate for child care but do NOT provide child care or contract with the California Department of Education to provide child care and developmental services.  
 Organization: \_\_\_\_\_ Service Provided: \_\_\_\_\_  
 Location: \_\_\_\_\_ Service Area: \_\_\_\_\_
  
- 4. Public Agency Representative** - Including city, county and local education agencies.  
 Agency: COLLEGE Service Area: CENTRAL COUNTY SOUTH
  
- 5. All Other**- Please describe:  
 \_\_\_\_\_  
 \_\_\_\_\_



**B. GEOGRAPHIC, ETHNIC, AND CULTURAL DIVERSITY REPRESENTATION**

CalWORKS legislation AB 1542 (Education Code 8499.3 d) states, "Every effort shall be made to ensure that the ethnic racial, and geographic composition of the local planning council is reflective of the ethnic, racial, and geographic distribution of the population of the county"

Please indicate your ethnic origin:

Which region of the County would you represent:

*CENTRAL/SOUTH*

- White (non-Hispanic)
- Black (Includes African, Jamaican, Trinidad and West Indian)
- Hispanic (includes Mexican, Puerto Rican Cuban, Latin American or Spanish)
- Asian or Pacific Islander (includes Pakistani, East Indian, Japanese, Tongan, Filipino, Laotian, or Vietnamese)
- American Indian or Alaskan Native (includes persons who identify themselves or are known as such by virtue or tribal association)
- Other \_\_\_\_\_

**C. CURRENT COUNCIL INVOLVEMENT:**

Are you currently an active participant on a Council Committee?  No  Yes  
Which Committee: LPC What is your participation? MEMBER

**D. INTERESTS:** Personal/Professional areas of interest/experience/skills that could benefit the Council:

ECE Knowledge / Parent Experience  
Teacher education / experience

I am interested in becoming a Council representative because:

Continuing as a member / Volunteer Service to County

**E. MEMBER RESPONSIBILITIES:** Members are expected to attend regular meetings on the fourth Monday of July, September, November, January, March, and May from 3:00 p.m. to 5:00 p.m. and participate in at least one committee. Additional meetings may be scheduled for training and council business.

Are you able to commit to regular participation, given this schedule:  Yes  No

If needed, do you have the support of your agency/employer to be an active member of the Council?  
 Yes  No

**F. How did you hear about the Planning Council?**

\_\_\_\_\_  
\_\_\_\_\_

Please attach your resume and a letter of interest with this application. Mail completed application, resume and letter of interest to the Contra Costa County Local Planning and Advisory Council (LPC) Coordinator at the Contra Costa County Office of Education, 77 Santa Barbara Road, Pleasant Hill, CA 94523.

For more information please call the LPC Coordinator at (925) 942-3413.

Signature: \_\_\_\_\_

Date: 4-11-2016

## **Joan M. Means**

Pleasant Hill, CA 94523

### **EDUCATION**

- Graduate: Syracuse University – Syracuse, NY  
M.S. Degree, August, 1971  
Major in Early Childhood Education
- University of California – Davis, CA  
December, 1969 – June, 1970  
Courses in Child Development
- Undergraduate: University of California – Davis, CA  
B.S. Degree, December, 1969  
Major in Child Development
- High School: Fremont High School – Oakland, CA  
Graduate, June 1965
- Additional Courses: Diablo Valley College – Pleasant Hill, CA  
Conflict Resolution Certification Course  
Early Childhood Education Administration Course  
Contra Costa County Professional Development Program -  
Professional Growth Course on Teacher Wages  
Contra Costa Child Care Council – Concord, CA  
Early Steps to Reading Success Course Certification

### **JOB EXPERIENCE**

- Adjunct Faculty: Diablo Valley Community College  
August, 2001 – Current
- Solano Community College  
June, 2005 – December, 2015
- Instructor: Acalanes Adult Education  
September, 2002 – December, 2006
- Instructor: Contra Costa Child Care Council Learning Institute  
January, 2003 – June, 2003
- Director: Clayton Children's Center – Clayton, CA  
April, 1995 – June, 2002

Director: Pioneer Montessori School – Pleasant Hill, CA  
February, 1994 – January, 1995

Owner & Manager: Metro Community Management – Walnut Creek, CA  
January, 1983 – February, 1994  
Association Property Management Company

**PROFESSIONAL ORGANIZATIONS/PUBLIC SERVICE**

Commissioner for Contra Costa County First Five (2004 – 2011)

Member of NAEYC/CAEYC (1983 – current)

Member of Contra Costa County/Office of Education Local Planning Council (1998 – current)

Member California Community Colleges Early Childhood Educators

Founding Member of Diablo Valley Directors group

Presenter of several workshops on the education of young children for PACE and other private  
child care organizations

**HOBBIES**

Playing bridge, camping and hiking, travel and reading.

**FAMILY**

Married (44 years), with two grown children.



## Mary Louise Vander Meulen - Re: Letter of intent

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**From:** Mary Louise Vander Meulen  
**To:** Deborah Penry  
**Subject:** Re: Letter of intent

---

April 12, 2016

I would like to be reappointed to the Contra Costa Local Planning and Advisory Council for Early-Care and Education, seat Community 2 Central/South County.

Deborah Penry

Deborah Penry  
Early Education Coordinator  
Care Parent Network



Contra  
Costa  
County

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. 106  
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:

ContraCosta Local Planning and Advisory Council

Community 2 - Central/South County

PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION

PRINT EXACT SEAT NAME (if applicable)

1. Name: Penry Deborah L  
(Last Name) (First Name) (Middle Name)

2. Address: Orinda, CA 94563  
(No.) (Street) (Apt.) (City) (State) (Zip Code)

3. Phones: (Home No.) (Work No.) (Cell No.)

4. Email Address:

5. EDUCATION: Check appropriate box if you possess one of the following:

High School Diploma  G.E.D. Certificate  California High School Proficiency Certificate

Give Highest Grade or Educational Level Achieved Ph.D

Names of colleges / universities attended	Course of Study / Major	Degree Awarded	Units Completed		Degree Type	Date Degree Awarded
			Semester	Quarter		
A) University of Washington	Oceanography	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>			Ph.D	1988
B)		Yes No <input type="checkbox"/> <input type="checkbox"/>				
C)		Yes No <input type="checkbox"/> <input type="checkbox"/>				
D) Other schools / training completed:	Course Studied	Hours Completed	Certificate Awarded: Yes No <input type="checkbox"/> <input type="checkbox"/>			

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.

<p>A) Dates (Month, Day, Year)            From <input type="text"/> To <input type="text"/>            8/1/2006 present            Total: Yrs. <input type="text"/> Mos. <input type="text"/>            9 9            Hrs. per week <input type="text"/> 20 . Volunteer <input type="checkbox"/></p>	<p>Title            Early Education Coordinator            Employer's Name and Address            Care Parent Network            1340 Arnold Dr. Suite 115            Martinez, CA 94553</p>	<p>Duties Performed            training for early education professionals in supporting families of children with special needs</p>
<p>B) Dates (Month, Day, Year)            From <input type="text"/> To <input type="text"/>            Total: Yrs. <input type="text"/> Mos. <input type="text"/>            Hrs. per week <input type="text"/> . Volunteer <input type="checkbox"/></p>	<p>Title            Employer's Name and Address</p>	<p>Duties Performed</p>
<p>C) Dates (Month, Day, Year)            From <input type="text"/> To <input type="text"/>            Total: Yrs. <input type="text"/> Mos. <input type="text"/>            Hrs. per week <input type="text"/> . Volunteer <input type="checkbox"/></p>	<p>Title            Employer's Name and Address</p>	<p>Duties Performed</p>
<p>D) Dates (Month, Day, Year)            From <input type="text"/> To <input type="text"/>            Total: Yrs. <input type="text"/> Mos. <input type="text"/>            Hrs. per week <input type="text"/> . Volunteer <input type="checkbox"/></p>	<p>Title            Employer's Name and Address</p>	<p>Duties Performed</p>



7. How did you learn about this vacancy?

CCC Homepage  Walk-In  Newspaper Advertisement  District Supervisor  Other current member

8. Do you have a Familial or Financial Relationship with a member of the Board of Supervisors? (Please see Board Resolution no. 2011/55, attached): No  Yes

If Yes, please identify the nature of the relationship:

9. Do you have any financial relationships with the County such as grants, contracts, or other economic relations? No  Yes

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 publically accessible. I understand and agree that misstatements / omissions of material fact may cause forfeiture of my rights to serve on a Board, Committee, or Commission in Contra Costa County.

Sign Name: \_\_\_\_\_ Date: 4/11/16

### Important Information

1. This application is a public document and is subject to the California Public Records Act (CA Gov. Code §6250-6270).
2. 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 grandfather, 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.



**Contra Costa County  
Child Care and Development Planning Council**

**APPLICATION FOR MEMBERSHIP**

Name: Deborah Penry

Home Address: \_\_\_\_\_ City: Orinda Zip: 94563

Business/Agency/Affiliation: Care Parent Network

Address: 1340 Arnold Dr., Ste 115 City: Martinez Zip: 94553

Type of Organization: Family Resource Center Position: Early Education Coordinator

Day Phone \_\_\_\_\_ FAX: \_\_\_\_\_ mail: \_\_\_\_\_

**A. CATEGORIES FOR APPOINTMENT**

The County Board of Supervisors and the Superintendent of Schools make appointments to the Child Care and Development Planning Council. Members must live or work in Contra Costa County. Twenty percent of the Planning Council members are to be drawn from each of the following categories described below: Child Care Consumer, Child Care Provider, Community Representative, Public Agency Representative, and All Other. Please indicate which categories you could represent.

- 1. Consumer of Child Care Services**—using child care or have used it within the past 36 months.

Are you currently utilizing Child Care? \_\_\_ Yes \_\_\_ No Date you last used it: \_\_\_\_\_

Type of Care: \_\_\_\_\_ Location: \_\_\_\_\_

Length of Time as a Consumer: \_\_\_\_\_

- 2. Child Care Provider**- please check the types of care you provide and note the number of children:

\_\_\_\_\_ Licensed family care provider # of children licensed for \_\_\_\_\_

\_\_\_\_\_ Licensed & publicly funded child care center # of children licensed for \_\_\_\_\_

\_\_\_\_\_ Licensed, private for profit, or private non-profit child care center # of children licensed for \_\_\_\_\_

\_\_\_\_\_ Subsidized Child Care Program # of children licensed for \_\_\_\_\_

\_\_\_\_\_ License exempt child care provider # of children cared for \_\_\_\_\_

Location of your facility: \_\_\_\_\_ Program/Center Name: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

- 3. Community Representative:** Includes civic or community based agencies or business that advocate for child care but do NOT provide child care or contract with the California Department of Education to provide child care and developmental services.

Organization: CARE Parent Network

Service Provided: resources & training for early education professionals who work with children with special needs

Location: Martinez, CA

Service Area: Contra Costa County

- 4. Public Agency Representative**- Including city, county, and local education agencies.  
Agency: \_\_\_\_\_ Service Area: \_\_\_\_\_

- 5. All Other**- Please describe:

\_\_\_\_\_

**B. GEOGRAPHIC, ETHNIC, AND CULTURAL DIVERSITY REPRESENTATION**

CalWORKS legislation AB 1542 (Education Code 8499.3 d) states, "Every effort shall be made to ensure that the ethnic racial, and geographic composition of the local planning council is reflective of the ethnic, racial, and geographic distribution of the population of the county"

Please indicate your ethnic origin: \_\_\_\_\_ Which region of the County would you represent: Central County

- X** White (non-Hispanic)
- Black (Includes African, Jamaican, Trinidad and West Indian)
- Hispanic (includes Mexican, Puerto Rican Cuban, Latin American or Spanish)
- Asian or Pacific Islander (includes Pakistani, East Indian, Japanese, Tongan, Filipino, Laotian, or Vietnamese)
- American Indian or Alaskan Native (includes persons who identify themselves or are known as such by virtue or tribal association)
- Other \_\_\_\_\_

**C. CURRENT COUNCIL INVOLVEMENT:**

Are you currently an active participant on a Council Committee? \_\_\_ No X Yes  
Which Committee: Executive Committee, School Readiness Committee, Adhoc Facilities Committee  
What is your participation? Current LPC Chair, voting member of committees listed above.

**D. INTERESTS:** Personal/Professional areas of interest/experience/skills that could benefit the Council:  
I am the parent of a child with special needs, and I work for an organization that serves families of children with special needs. I develop resources and trainings for early education professionals to help them successfully include children with special needs in their child care and preschool programs. Please see my resume (attached) for a summary of my professional background.

I am interested in becoming a Council representative because: I would like to promote inclusion of children with special needs in community-based child care programs by developing strategies, resources and training that will enable child care providers to feel competent to include children with special needs and will give child care providers the tools to include children with special needs successfully and in meaningful ways.

**E. MEMBER RESPONSIBILITIES:** Members are expected to attend regular meetings on the fourth Thursday of January, March, May, July, September, and the first Thursday of December, from 5:30 p.m. to 7:30 p.m. and participate in at least one committee. Additional meetings may be scheduled for training and council business.

Are you able to commit to regular participation, given this schedule: X Yes \_\_\_\_\_ No

If needed, do you have the support of your agency/employer to be an active member of the Council?  
X Yes \_\_\_\_\_ No

**F.** How did you hear about the Planning Council? I initially heard about the LPC through my position with Care Parent Network. I am currently a member of the LPC.

Signature: \_\_\_\_\_

Date: 4/11/16



# Deborah L. Penry

## PERSONAL INFORMATION

Address: Orinda, CA 94563

Phone:

Email:

## PROFESSIONAL INFORMATION

Address: 1340 Arnold Dr., Suite 115  
Martinez, CA 94553

Phone: (925) 313-0999 x107

Email: [dpenry@CareParentNetwork.org](mailto:dpenry@CareParentNetwork.org)

## EDUCATION

University of Delaware, Newark, DE 19711  
Bachelor of Arts in Biological Science with High Honors and Distinction, June 1979.

The College of William and Mary, Williamsburg, VA 23185  
Master of Arts in Marine Science, August 1982.

University of Washington, Seattle, WA 98195  
Doctor of Philosophy in Oceanography, August 1988.

## PROFESSIONAL EXPERIENCE

Early Education Coordinator, Care Parent Network, Martinez, CA, August 2006 – present

Educational Staff Member, Lawrence Hall of Science, University of California, Berkeley, CA,  
January 2004 - 2007

Adjunct Faculty Member, Las Positas College, Livermore, CA, 2002-2006.

Assistant Professor, University of California at Berkeley, Department of Integrative Biology,  
Berkeley, CA, 1991-2002

Adjunct Assistant Professor, University of Delaware, College of Marine Studies,  
Lewes, DE, 1990 – 1992

Research Associate, University of Maryland, Horn Point Laboratory, Cambridge, MD, 1990 - 1992.

Postdoctoral Research Associate, University of Washington, School of Oceanography,  
Seattle, WA, 1988 -1990.

Research Assistant, University of Washington, School of Oceanography, Seattle, WA, 1983-1988.

Research Associate, McNeese State University, U.S. Department of Energy Brine Disposal Monitoring  
Program, Lake Charles, LA, 1982-1983.

Laboratory Technician, Core Laboratories, Inc., Lake Charles, LA, 1982-1983.

Research Assistant, Virginia Institute of Marine Science, Department of Invertebrate  
Ecology, Gloucester Point, VA, 1979-1982.



**PROFESSIONAL HIGHLIGHTS AS EARLY EDUCATION COORDINATOR FOR CARE PARENT NETWORK**

Guest lecturer about IDEA and about inclusion of children with special needs in early education/child development/teaching training classes at Diablo Valley College, Los Medanos College, Contra Costa College, and Touro University.

Workshop organizer and presenter for First 5 Contra Costa. "Partnering with Families to Address Concerns about a Child's Development", May 2012.

Steering Committee Member, Early Childhood Leadership Alliance, Contra Costa County, 2011-2015

Workshop organizer, "Road Map to Early Start and Special Education Preschool Services", Nov. 2006

Materials developed: Resource binder entitled "Resources for Professionals Serving Families of Children with Special Needs"

Workshop organizer, "Maximizing the Effectiveness of Early Intervention: Supporting Families of Children with Special Needs", Feb. 2007

Materials developed: Resource binder entitled "Supporting Families of Children with Special Needs"

Workshop organizer, "May I Play, Too? Resources for Including Children of All Abilities in Early Education and Child Care Programs", May 2007 and Oct. 2007.

Materials developed: "May I Play, Too?" Inclusion Kit

Workshop organizer, "Serving Children with Special Needs: Supporting Families of Diverse Cultures", Nov.2007

Materials developed: Resource packet entitled "Supporting Families of Diverse Cultures"

Presenter, "Early Start and Family Resource Center Orientation", Ninth Annual Family Resources and Supports Institute, sponsored by California Department of Developmental Services. Feb. 2007.

Member, Contra Costa Inclusion Team, and participant in "All of Us Together...Moving to Inclusion: Challenging Our Assumptions About Challenging Behavior" Institute, organized by West Ed Center for Prevention. April 2007.

Workshop organizer, "Road Map to Early Intervention in Contra Costa County", Oct, 2013.

Materials developed: "Overview of Services, Eligibility and Referral Processes for Agencies and Programs Serving Children Birth to Five Years in Contra Costa County"

Member, CAPTAIN (California Autism Professional Training and Information Network), East Bay representative from Family Resource Centers

**VOLUNTEER SERVICE FOR PERSONS WITH DEVELOPMENTAL DISABILITIES AND THEIR FAMILIES**

Chair, Community Advisory Committee, Contra Costa Special Education Local Plan Area

Past member, Board of Directors, Developmental Disabilities Council of Contra Costa County

Resource Parent/Mentor Parent, Care Parent Network, Martinez, CA (before employment at Care)

Member, Special Education Steering Committee for the Orinda Union School District, Orinda CA

Presenter, "Diverse Abilities" Week, Orinda Intermediate School, Orinda, CA, October 2003, February 2011, February 2012, February 2013 (invited)

Participant, "Early Childhood Education Summit", First Five Commission, Contra Costa County, CA January 2003

Past member, Ad Hoc Committee on Early Childhood Education, First Five Commission, Contra Costa County, CA, 2003

**VOLUNTEER SERVICE (CONTINUED)**

Participant, "Transfer of Knowledge" meetings, Contra Costa Child Care Council, Concord, CA  
(before employment at Care)

Presenter, new caseworker training, Regional Center of the East Bay (before employment at Care)

Presenter, Cross-training workshop, Care Parent Network (before employment at Care)

Organizer, inclusion and general education workshop for parents, Care Parent Network (before  
employment at Care)

Board member, Contra Costa Local Planning and Advisory Council for Early Care and Education,  
LPC Chair 2014-2016.

**MEMBERSHIPS (EARLY EDUCATION)**

National Association for the Education of Young Children (national & Contra Costa chapter)  
Council for Exceptional Children: Division for Early Childhood, Division on Developmental Disabilities

**PROFESSIONAL SERVICE (SCIENCE)**

Organizing committee, National Academy of Sciences: Frontiers of Science Symposium, 1994, 1995.

Organizing committee, National Academy of Sciences: German-American Frontiers of Science  
Symposium, 1995, 1996, committee chair, 1996.

Organizing committee, National Academy of Sciences: Japanese-American Frontiers of Science  
Symposium, 1998.

National Science Foundation, Ocean Sciences, external reviewer & panel member.

National Science Foundation, Office of Polar Programs, panel member.

American Society of Limnologists and Oceanographers, panel member for DIALOG program, 1997.

American Society of Limnologists and Oceanographers, member of G. Evelyn Hutchinson Award  
committee, 1998-2002.

Department of Defense, Graduate Fellowships Program, Oceanography panel member 1997,  
panel chair 1999.

American Geophysical Union, member of Honors and Recognitions Committee, 2001-2004

American Geophysical Union, member of Ewing Medal Committee, 2004, 2005

**PEER-REVIEWED PUBLICATIONS AND INVITED PRESENTATIONS (SCIENCE)** -- provided on request

**HONORS**

Phi Beta Kappa Honor Society  
Phi Kappa Phi Honor Society  
Beta Beta Beta Biological Honor Society

**AWARDS**

National Science Foundation Graduate Fellowship  
Graduate Opportunities Research Assistantship, University of Washington  
Whitson Scholarship, University of Washington  
Young Investigator Award, National Science Foundation  
Alan T. Waterman Award, National Science Foundation

## **Letter of Interest**

### **to continuing to serve on the Local Planning Council**

I am Janeen Rockwell-Owens, the owner and director of Our Yard Preschool in Antioch, California for over thirty two years. My passion and love is to advocate, teach, educate, train and care for young children and those who work with them. I have been a California Mentor Teacher, volunteer for the East County Providers' Network, Family Child Care of Contra Costa County and frequently travel to Sacramento to advocate for both young children's issues as well as those concerning the disabled. I also am still working as a instructor for UC Davis, training family child care providers all over the state of California.

I would like to continue to serve on the Local Planning Council for Contra Costa County. I enjoy working for the rights of children and representing Family Child Care Providers.

Thank you,

Janeen Rockwell-Owens





Contra  
Costa  
County

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. 106  
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:

Local Planning Council

Community-East

PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION

PRINT EXACT SEAT NAME (If applicable)

1. Name: Rockell-Owens, Janeen Dee  
 (Last Name) (First Name) (Middle Name)

2. Address: Antioch, CA 94509  
 (No.) (Street) (Apt.) (City) (State) (Zip Code)

3. Phones: \_\_\_\_\_  
 (Home No.) (Work No.) (Cell No.)

4. Email Address: \_\_\_\_\_

5. EDUCATION: Check appropriate box if you possess one of the following:

High School Diploma  G.E.D. Certificate  California High School Proficiency Certificate

Give Highest Grade or Educational Level Achieved AS in Early Childhood Education

Names of colleges / universities attended	Course of Study / Major	Degree Awarded	Units Completed		Degree Type	Date Degree Awarded
			Semester	Quarter		
A) UC Davis	Child Development	Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>	9			
B) Los Medanos College	Early Childhood ED.	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>	110		AS	1990
C)		Yes No <input type="checkbox"/> <input type="checkbox"/>				
D) Other schools / training completed:	Course Studied	Hours Completed	Certificate Awarded: Yes No <input type="checkbox"/> <input type="checkbox"/>			

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.

<p>A) Dates (Month, Day, Year)            From <input type="text"/> To <input type="text"/>            2007 present            Total: Yrs. <input type="text"/> Mos. <input type="text"/>            6            Hrs. per week <input type="text"/> 10 . Volunteer <input type="checkbox"/></p>	<p>Title            Instructor            Employer's Name and Address            First 5, Brighter Beginnings            512 5th Street            Antioch, CA 94509</p>	<p>Duties Performed            Teaching parents and children.</p>
<p>B) Dates (Month, Day, Year)            From <input type="text"/> To <input type="text"/>            1999 present            Total: Yrs. <input type="text"/> Mos. <input type="text"/>            13            Hrs. per week <input type="text"/> varies . Volunteer <input type="checkbox"/></p>	<p>Title            Instructor            Employer's Name and Address            UC Davis            Davis, CA</p>	<p>Duties Performed            Train in home child care providers.</p>
<p>C) Dates (Month, Day, Year)            From <input type="text"/> To <input type="text"/>            1978 2008            Total: Yrs. <input type="text"/> Mos. <input type="text"/>            30            Hrs. per week <input type="text"/> 60 . Volunteer <input type="checkbox"/></p>	<p>Title            Owner, Director, Teacher            Employer's Name and Address            Our Yard Preschool            3209 G Street            Antioch, CA 94509</p>	<p>Duties Performed            All aspects of the operation of the preschool.</p>
<p>D) Dates (Month, Day, Year)            From <input type="text"/> To <input type="text"/>            2000 2008            Total: Yrs. <input type="text"/> Mos. <input type="text"/>            8            Hrs. per week <input type="text"/> 10 . Volunteer <input type="checkbox"/></p>	<p>Title            Mentor Teacher            Employer's Name and Address            California Mentor Teacher Program            Los Medanos College            Leland Road            Pittsburg, CA</p>	<p>Duties Performed            Mentoring college students in ECE programs.</p>



8. Do you have a Familial or Financial Relationship with a member of the Board of Supervisors? (Please see Board Resolution no. 2011/55, attached): No  Yes

If Yes, please identify the nature of the relationship:

9. Do you have any financial relationships with the County such as grants, contracts, or other economic relations? No  Yes

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 publically accessible. I understand and agree that misstatements / omissions of material fact may cause forfeiture of my rights to serve on a Board, Committee, or Commission in Contra Costa County.

Sign Name: \_\_\_\_\_

Date: 4-10-2016

### Important Information

1. This application is a public document and is subject to the California Public Records Act (CA Gov. Code §6250-6270).
2. 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.

THIS FORM IS A PUBLIC DOCUMENT





learn • lead • achieve



www.ece.org for Early Care and Education

**APPLICATION FOR MEMBERSHIP/Form B**

Name: Janeen Rockwell-Owens

Home Address: \_\_\_\_\_ City: Antioch Zip: 94509

Business/Agency/Affiliation: Family Child Care of Contra Costa

Address: Detroit City: Concord Zip: 94521

Type of Organization: non-profit Position: Past President

Day Phone: \_\_\_\_\_ FAX: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

**A. CATEGORIES FOR APPOINTMENT**

The County Board of Supervisors and the Superintendent of Schools make appointments to the Early Care and Education Planning Council. Members must live or work in Contra Costa County. Twenty percent of the Planning Council members are to be drawn from each of the following categories described below: Child Care Consumer, Child Care Provider, Community Representative, Public Agency Representative, and All Other. Please indicate which categories you could represent.

- 1. Consumer of Child Care Services** - using childcare or have used it within the past 36 months.

Are you currently utilizing Child Care?  Yes  No Date you last used it: \_\_\_\_\_

Type of Care: \_\_\_\_\_ Location: \_\_\_\_\_

Length of Time as a Consumer: \_\_\_\_\_

- 2. Child Care Provider**- please check the types of care you provide and note the number of children:

_____ Licensed family care provider	# of children licensed for _____
_____ Licensed & publicly funded child care center	# of children licensed for _____
_____ Licensed, private for profit, or private non-profit child care center	# of children licensed for _____
_____ Subsidized Child Care Program	# of children licensed for _____
_____ License exempt child care provider	# of children cared for _____

Location of your facility: \_\_\_\_\_ Program/Center Name: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- 3. Community Representative:** Includes civic or community based agencies or business that advocate for child care but do NOT provide child care or contract with the California Department of Education to provide child care and developmental services.

Organization: Family Child Care of Contra Costa Service Provided: Education & Support for childcare providers

Location: Detroit, Concord Service Area: Contra Costa County

- 4. Public Agency Representative** - Including city, county and local education agencies.
- Agency: \_\_\_\_\_ Service Area: \_\_\_\_\_

- 5. All Other**- Please describe:
- \_\_\_\_\_
- \_\_\_\_\_

**B. GEOGRAPHIC, ETHNIC, AND CULTURAL DIVERSITY REPRESENTATION**

CalWORKS legislation AB 1542 (Education Code 8499.3 d) states, "Every effort shall be made to ensure that the ethnic racial, and geographic composition of the local planning council is reflective of the ethnic, racial, and geographic distribution of the population of the county"

Please indicate your ethnic origin:

- White (non-Hispanic)
- Black (Includes African, Jamaican, Trinidad and West Indian)
- Hispanic (includes Mexican, Puerto Rican, Cuban, Latin American or Spanish)
- Asian or Pacific Islander (includes Pakistani, East Indian, Japanese, Tongan, Filipino, Laotian, or Vietnamese)
- American Indian or Alaskan Native (includes persons who identify themselves or are known as such by virtue or tribal association)
- Other \_\_\_\_\_

Which region of the County would you represent? East Contra Costa County

**C. CURRENT COUNCIL INVOLVEMENT:**

Are you currently an active participant on a Council Committee? \_\_\_\_\_ No  Yes

If yes,

Which Committee: Ad Hoc Committee

What is your participation? Member

**D. INTERESTS:**

Personal/Professional areas of interest/experience/skills that could benefit the Council:

I love to teach, educate, train, care for learn more about and advocate for young children. They are my passion! I have been active in the field for over 35 yrs. I also love teaching & training adults about all the aspects of child development.

I am interested in becoming a Council representative because:

I have served on the board of several child care & development organizations & feel I have a great deal to contribute to the council. I want to represent child care providers & advocate for young children.

**E. MEMBER RESPONSIBILITIES:**

Members are expected to attend regular meetings on the fourth Thursday of January, March, May, July, September, and the first Thursday of December, from 5:30 p.m. to 7:30 p.m. and participate in at least one committee. Additional meetings may be scheduled for training and council business.

Are you able to commit to regular participation, given this schedule:  Yes \_\_\_\_\_ No

If needed, do you have the support of your agency/employer to be an active member of the Council?

Yes \_\_\_\_\_ No

**F. How did you hear about the Planning Council?**

I was exposed to the LPC through the Child Care Providers Union.

Please attach your resume and a letter of interest with this application.

Mail completed application, resume and letter of interest to the Contra Costa County Local Planning Council (LPC) Coordinator at the Contra Costa County Office of Education, 77 Santa Barbara Road, Pleasant Hill, CA 94523.

For more information please call the LPC Coordinator at (925) 942-3413.

Signature: \_\_\_\_\_

Date: 4-10-2016



# Janeen Rockwell-Owens

Antioch 94509

## Early Childhood Educator

- Forty years successful experience teaching both preschoolers and early childhood educators
- Extensive practical hands on experience owning and directing a preschool
- A 100 % successfully funded grant writer
- Passionate and enthusiastic about advocating for the rights of young children & the disabled
- Mentoring and training of early childhood educators
- Author of preschool and adult curriculum

## RELAVENT SKILLS

### Teaching and Training

- Specialized in working with Special Needs Students, including those with Autism Spectrum Disorder and ADHD
- Extensive training in behavior management skills with young children

### Adult Management Skills

- Developed the "Sandwich Effect", how to deliver negative news with a positive approach with outstanding success
- Training parents in how to work with their children, through Toilet Learning, Raising A Reader, Managing Difficult Behavior, Tigo and several other classes.
- Mentor Teaching
  - Personal instruction in child care homes to increase quality of child care

### Writing and Designing

- Coauthored the curriculum for a UC Davis training "The Business of Family Child Care"
- Authored numerous grants for child development, all were funded
- Designed successful creative preschool curriculum

## EMPLOYMENT HISTORY

1990-present	Teacher, trainer	UC Davis Extension, Davis, CA
2010-present	Teacher, trainer	City of Sunnyvale, Sunnyvale, CA
1976-2009		Our Yard Preschool, Antioch, CA

## Education

Degree in Early Childhood Education	1986
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To: Board of Supervisors  
Contra Costa County

From: Aurora E. Ruth

Re: Letter of Interest

I would like to be reappointed in the Local Planning Council. I truly believed that my contribution to represent West County children and families is very valuable. My desire to work closely with children and families in West County is essential and has great impact on children's educational growth and development and lifelong learning.

Thank you



Contra  
Costa  
County

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. 106  
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:

[Redacted]

[Redacted]

PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION

PRINT EXACT SEAT NAME (if applicable)

1. Name: Ruth Aurora E.  
(Last Name) (First Name) (Middle Name)

2. Address: [Redacted] Richmond CA 94801  
(No.) (Street) (Apt.) (City) (State) (Zip Code)

3. Phones: [Redacted]  
(Home No.) (Work No.) (Cell No.)

4. Email Address: [Redacted]

5. EDUCATION: Check appropriate box if you possess one of the following:

High School Diploma  G.E.D. Certificate  California High School Proficiency Certificate

Give Highest Grade or Educational Level Achieved: BA Elem Education - MA - Thesis writing Human Development

Names of colleges / universities attended	Course of Study / Major	Degree Awarded	Units Completed		Degree Type	Date Degree Awarded
			Semester	Quarter		
A) <u>Univ of San Agustin PHILIPPINES</u>	<u>BSEEd</u>	Yes No <input type="checkbox"/> <input type="checkbox"/>			<u>BA</u>	<u>1966</u>
B) <u>Los Medanos College Pittsburg CA</u>	<u>Administration Supervision</u>	Yes No <input type="checkbox"/> <input type="checkbox"/>	<u>12</u>			
C) <u>Pacific Oaks College Pasadena</u>	<u>MA in Human Development</u>	Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>	<u>21</u>			<u>Missed Thesis Writing</u>
D) Other schools / training completed:	Course Studied	Hours Completed	Certificate Awarded: Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>			
<u>CCC - DVC - St. Mary's College</u>	<u>ECE courses</u>					



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 <u>12/09</u> To <u>Present</u> Total: Yrs. <u>7</u> Mos. <u>    </u> Hrs. per week <u>    </u> . Volunteer <input type="checkbox"/>	Program Director Employer's Name and Address Pride & Joy Preschool 1321 Liberty St. El Cerrito, CA 94530	Responsible for the daily operations. Responsible for Title XX guidelines and compliance Train staff & meeting parents
B) Dates (Month, Day, Year) From <u>2006</u> To <u>2009</u> Total: Yrs. <u>3</u> Mos. <u>    </u> Hrs. per week <u>40</u> . Volunteer <input type="checkbox"/>	Education Sys. Mgr. Employer's Name and Address Berkeley YMCA Head Start 2009- 10th St. Berkeley CA 94710	Responsible for compliance of the education component of Head Start program Train & supervise all education staff Administer AB 31 contracts
C) Dates (Month, Day, Year) From <u>1984</u> To <u>2006</u> Total: Yrs. <u>22</u> Mos. <u>    </u> Hrs. per week <u>    </u> . Volunteer <input type="checkbox"/>	Director (Center) Employer's Name and Address Contra Costa County Comm. Soc. Bureau BALBOA - LAKE Verde POWERS (sites)	Responsible for Center program operation Responsible for Title XX Licensing compliance. Responsible for meeting Head Start compliance Title V & Title XX guidelines
D) Dates (Month, Day, Year) From <u>1974</u> To <u>1984</u> Total: Yrs. <u>    </u> Mos. <u>    </u> Hrs. per week <u>    </u> . Volunteer <input type="checkbox"/>	Head Start Director Employer's Name and Address South Side Comm. Center 981 Marina Way Richmond CA 94801	Responsible for Agencies HS program operation Oversee financial responsibilities of the HS program (Agency) ultimately responsible for meeting Title V - Title XX county - state - and HS performance standards and guidelines



7. How did you learn about this vacancy?

CCC Homepage  Walk-In  Newspaper Advertisement  District Supervisor  Other

8. Do you have a Familial or Financial Relationship with a member of the Board of Supervisors? (Please see Board Resolution no. 2011/55, attached): No  Yes

If Yes, please identify the nature of the relationship:

9. Do you have any financial relationships with the County such as grants, contracts, or other economic relations? No  Yes

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 publically accessible. I understand and agree that misstatements / omissions of material fact may cause forfeiture of my rights to serve on a Board, Committee, or Commission in  Costa County.

Sign Name: \_\_\_\_\_ Date: 4-12-16

### Important Information

1. This application is a public document and is subject to the California Public Records Act (CA Gov. Code §§250-6270).
2. 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 grandfather, 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.



**APPLICATION FOR MEMBERSHIP/Form B**

Name: Aurora E. Reth  
 Home Address: \_\_\_\_\_ City: Richmond Zip: 94801  
 Business/Agency/Affiliation: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Type of Organization: \_\_\_\_\_ Position: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_ FAX: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

**A. CATEGORIES FOR APPOINTMENT**

The County Board of Supervisors and the Superintendent of Schools make appointments to the Early Care and Education Planning Council. Members must live or work in Contra Costa County. Twenty percent of the Planning Council members are to be drawn from each of the following categories described below: Child Care Consumer, Child Care Provider, Community Representative, Public Agency Representative, and All Other. Please indicate which categories you could represent.

- 1. Consumer of Child Care Services** - using childcare or have used it within the past 36 months.  
 Are you currently utilizing Child Care?  Yes  No      Date you last used it: \_\_\_\_\_  
 Type of Care: \_\_\_\_\_      Location: \_\_\_\_\_  
 Length of Time as a Consumer: \_\_\_\_\_
  
- 2. Child Care Provider**- please check the types of care you provide and note the number of children:  

_____ Licensed family care provider	# of children licensed for _____
_____ Licensed & publicly funded child care center	# of children licensed for _____
_____ Licensed, private for profit, or private non-profit child care center	# of children licensed for _____
_____ Subsidized Child Care Program	# of children licensed for _____
_____ License exempt child care provider	# of children cared for _____

  
 Location of your facility: \_\_\_\_\_      Program/Center Name: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
- 3. Community Representative:** Includes civic or community based agencies or business that advocate for child care but do NOT provide child care or contract with the California Department of Education to provide child care and developmental services.  
 Organization: \_\_\_\_\_      Service Provided: \_\_\_\_\_  
 Location: \_\_\_\_\_      Service Area: \_\_\_\_\_
  
- 4. Public Agency Representative** - Including city, county and local education agencies.  
 Agency: \_\_\_\_\_      Service Area: \_\_\_\_\_
  
- 5. All Other-** Please describe:  
 \_\_\_\_\_  
 \_\_\_\_\_



**B. GEOGRAPHIC, ETHNIC, AND CULTURAL DIVERSITY REPRESENTATION**

CalWORKS legislation AB 1542 (Education Code 8499.3 d) states, "Every effort shall be made to ensure that the ethnic racial, and geographic composition of the local planning council is reflective of the ethnic, racial, and geographic distribution of the population of the county"

Please indicate your ethnic origin:

Which region of the County would you represent: West County

- White (non-Hispanic)
- Black (Includes African, Jamaican, Trinidad and West Indian)
- Hispanic (includes Mexican, Puerto Rican Cuban, Latin American or Spanish)
- Asian or Pacific Islander (includes Pakistani, East Indian, Japanese, Tongan, Filipino, Laotian, or Vietnamese)
- American Indian or Alaskan Native (includes persons who identify themselves or are known as such by virtue or tribal association)
- Other \_\_\_\_\_

**C. CURRENT COUNCIL INVOLVEMENT:**

Are you currently an active participant on a Council Committee? \_\_\_ No  Yes

Which Committee: Advocacy What is your participation? Active Member  
Nominating

**D. INTERESTS:** Personal/Professional areas of interest/experience/skills that could benefit the Council:

Strong advocates for children and families in State of CA.  
Mentor Director

I am interested in becoming a Council representative because: Serve the needs  
of children and families in Contra Costa county

**E. MEMBER RESPONSIBILITIES:** Members are expected to attend regular meetings on the fourth Monday of July, September, November, January, March, and May from 3:00 p.m. to 5:00 p.m. and participate in at least one committee. Additional meetings may be scheduled for training and council business.

Are you able to commit to regular participation, given this schedule:  Yes \_\_\_\_\_ No

If needed, do you have the support of your agency/employer to be an active member of the Council?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

**F. How did you hear about the Planning Council?**

\_\_\_\_\_  
\_\_\_\_\_

Please attach your resume and a letter of interest with this application. Mail completed application, resume and letter of interest to the Contra Costa County Local Planning and Advisory Council (LPC) Coordinator at the Contra Costa County Office of Education, 77 Santa Barbara Road, Pleasant Hill, CA 94523.

For more information please call the LPC Coordinator at (925) 942-3413.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Contra Costa County  
Local Planning and Advisory Council  
for Early Care and Education

**CONTRA COSTA LOCAL PLANNING AND ADVISORY COUNCIL FOR EARLY CARE AND EDUCATION**

Seat Title	Terms of Office		Name	Business/Affiliation Address	Home Address	Email	Work #	Home #	Fax #	Cell or Alternate #
	Appt. Date	Expires								
Consumer 1 West County	6/25/2013	4/30/2016	Dr. Crystal McClendon-Gourdine (First Vice-Chair)	Baby Love Child Development Services 845 Meadow View Drive Richmond, CA 94806	845 Meadow View Drive Richmond, CA 94806	herculesbabyllove@yahoo.com	510-799-9003	510-799-9003	510-799-9013	510-205-0000
Consumer 2 Central/South County	4/16/2013	4/30/2016	Cynthia Castain	My Space to Grow 7197 Amador Valley Blvd. Dublin, CA 94568	127 Trestle Cove Hercules, CA 94547	mstacc@comcast.com	925-829-4063	510-864-7750		510-912-9265
Consumer 3 Central/South County		4/30/2017	Vacant							
Consumer 4 East County	1/5/2016	4/30/2018	Deena Jones	Genetech Inc. 1 DNA Way South San Francisco, CA	77 Xena Court - Pittsburg, CA 94565	deej.lj@comcast.com		707-631-2197		
Child Care Provider 1 West County	4/16/2013	4/30/2016	Silvana Mosca-Carreon	ICRI-EI Nuevo Mundo Children's Center	208 Milbrook Dr. Pittsburg, 94565	bearre@nhu.edu	510-233-2329		510-965-1771	
Child Care Provider 2 Central/South County		4/30/2016	Vacant							
Child Care Provider 3 Central/South County	6/24/2014	4/30/2016	Luis Arenas	The Unity Council Deputy Director 1187 Meadow Lane Concord, CA 94520	420 Miller Avenue Vallejo CA 94591	larenas@unitycouncil.org	925-338-9150			510-931-9901
Child Care Provider 4 East County	12/2/2014	4/30/2017	Vacant							
Public Agency 1 West County	9/11/2012 10/6/2015	4/30/2018	Carolyn Johnson	Contra Costa County Community Services Bureau 3068 Grant Street Concord, 94520	1848 Cleveland Court Concord, 94521	sljohnson@ehsfed.cccounty.us	925-646-5797	925-270-7010	925-646-5815	925-852-9735
Public Agency 2 Central/South County		4/30/2018	Vacant							
Public Agency 3 Central/South County	4/16/2013	4/30/2016	Joan Means	Diablo Valley College Adjunct Faculty Early Childhood Education 321 Golf Club Road Pleasant Hill, CA 94523	96 Greenock Lane Pleasant Hill, 94523	jmeans@comcast.net	925-685-1230 ext. 1870	925-937-8921		925-788-8921
Public Agency 4 East County	1/5/2016	4/30/2018	Doug Rowe	Los Medanos College Pittsburg, CA 94565	718 Brown Street Martinez, CA 94553	drowe1949@gmail.com	925-228-5326			925-699-2069
Community 1 West County	6/25/2013	4/30/2016	Margaret Wiegert-Jacobs	CC Child Care Council Director, Early Learning Institute 1035 Detroit Avenue, #200 Concord, 94518	1003 Hacienda Drive Walnut Creek, 94598	margaret.jacobs@cocokids.org	(925) 676-5442	925-945-8129	925-676-5442	925-708-7179
Community 2 Central/South County	4/16/2013	4/30/2016	Dr. Deborah Penry (Chair)	CARE Parent Network Early Education Coordinator 1340 Arnold Drive, #115 Martinez, 94553	67 Rheem Blvd. Orinda, 94563	dpenny@CAREParentNetwork.org	(925)313-0989 ext. 107	925-528-9027	925-370-8651	925-528-9027
Community 3 Central/South County		4/30/2018	Vacant							
Community 4 East County	4/16/2013	4/30/2016	Janeen Rockwell-Owens	3209 G Street Antioch, CA 94509	3209 G Street Antioch, CA 94509	owensj@comcast.net	925-754-2518			
Discretionary 1 East County	10/6/2015	4/30/2018	Eran Perera	19 Oakview Lane Martinez, CA 94553	19 Oakview Lane Martinez, CA 94553	eran@pereravineyard.com		925-957-1918		925-323-5748
Discretionary 2 Central/South County	10/6/2015	4/30/2018	Daniel Safran (Second Vice-Chair)	Martinez Early Childhood Center 615 Arch Street Martinez, 94553	105 Rolling Green Cir. Pleasant Hill, CA 94523	danielsafran@yahoo.com		925-689-5452		925-898-1094
Discretionary 3 Central/South County	10/6/2015	4/30/2018	Cathy Roof		97 Valley Avenue Martinez, 94553	biscuit94553@aol.com	925-229-2000	925-228-2185	925-229-2088	925-899-2690
Discretionary 4 West County	12/16/2014	4/30/2016	Aurora Ruth		629 13th Street Richmond, CA 94801	auroraru@comcast.com				510-860-0599
LPC Coordinator			Ruth Fernandez	77 Santa Barbara Road Pleasant Hill, 94523		rfernandez@cccoc.k12.ca.us	925-942-3413		925-942-3480	925-586-2329
Administrative Assistant			Mary Louise Vander Meulen	77 Santa Barbara Road Pleasant Hill, 94523		mvandermeulen@cccoc.k12.ca.us	925-942-5313		925-942-3480	
CCCCOE Deputy Superintendent of Schools			Dr. Pamela Comfort	77 Santa Barbara Road Pleasant Hill, 94523		pcomfort@cccoc.k12.ca.us	925-942-3359		925-942-5319	