



**Contra
Costa
County**

For Office Use Only
Date Received:

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Accepted Rejected

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

MAIL OR DELIVER TO:
Contra Costa County
CLERK OF THE BOARD
661 Pine Street, Rm. 106
Martinez, California 94553-1292
PLEASE TYPE OR PRINT IN INK
(Each Position Requires a Separate Application)

RECEIVED
CITY CLERKS OFFICE
CITY OF RICHMOND
2014 JUN -6 PM 12:30

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

Advisory Council on Aging

City of Richmond

PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION

PRINT EXACT SEAT NAME (if applicable)

1. Name: Williams Janelle Simone
(Last Name) (First Name) (Middle Name)

2. Address: _____
(No.) (Street) (Apt.) (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 Juris Doctor

Names of colleges / universities attended	Course of Study / Major	Degree Awarded	Units Completed		Degree Type	Date Degree Awarded
			Semester	Quarter		
A) San Jose State University	Communicative Disorder	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>	124		BA	May 2001
B) Temple University	Law	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>	87		JD	May 2004
C)		Yes No <input type="checkbox"/> <input type="checkbox"/>				
D) Other schools / training completed: UC Berkeley Extension	Course Studied Mediation	Hours Completed 40	Certificate Awarded: Yes No <input checked="" 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) <u>From</u> <u>To</u> July 7, 2006 to Present</p> <p>Total: <u>Yrs.</u> <u>Mos.</u> 7 11</p> <p>Hrs. per week <u>40</u> . Volunteer <input type="checkbox"/></p>	<p>Title Consultant Specialist</p> <hr/> <p>Employer's Name and Address Kaiser Permanente Office of Labor Management Partnership One Kaiser Plaza Oakland, CA 94612</p>	<p>Duties Performed Led the development and implementation of national initiatives for the Office of Labor Management Partnership and National Diversity Department.</p>
<p>B) Dates (Month, Day, Year) <u>From</u> <u>To</u> January 15, 2006 to July 7, 2006</p> <p>Total: <u>Yrs.</u> <u>Mos.</u> 6</p> <p>Hrs. per week <u>40</u> . Volunteer <input type="checkbox"/></p>	<p>Title Project Administrator</p> <hr/> <p>Employer's Name and Address Mason Tillman Associates 1111 Broadway, Oakland, CA 94607</p>	<p>Duties Performed Conducted research and produced reports on local and state policies impacting affirmative action programs for various municipalities.</p>
<p>C) Dates (Month, Day, Year) <u>From</u> <u>To</u> October 15, 2005 to January 12, 2006</p> <p>Total: <u>Yrs.</u> <u>Mos.</u> 1 2</p> <p>Hrs. per week <u>40</u> . Volunteer <input type="checkbox"/></p>	<p>Title Senate Analyst</p> <hr/> <p>Employer's Name and Address University of California, San Francisco 500 Parnassus Avenue Room MUE-230 San Francisco, CA 94143</p>	<p>Duties Performed Provided staffing and leadership support to committees of the UCSF Academic Senate.</p>
<p>D) Dates (Month, Day, Year) <u>From</u> <u>To</u></p> <p>Total: <u>Yrs.</u> <u>Mos.</u></p> <p>Hrs. per week _____ . Volunteer <input type="checkbox"/></p>	<p>Title</p> <hr/> <p>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 Independent Research

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: _____

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: 06/05/14

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