



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

(Fach Position Requires a Separate Application)

| Aviation Advisory Committee PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION | | | At Large | At Large Position PRINT EXACT SEAT NAME (if applicable) | | | | |
|--|-----------------|---------------------|---------------------|--|-----------|------------|--|--|
| | | | | | | | | |
| 1. Name : Ha | ansen | | Christopher | | Bray | | | |
| | (Last Name) | | (First Name) | | (Mid | Idle Name) | | |
| 2. Address | • | | | Concord | CA | 94521 | | |
| | (No.) | (Street) | (Apt.) | (City) | (State) | (Zip Code) | | |
| 3. Phones: | | | | | 2 3 | | | |
| | (Home No.) | (Work | No.) | (Cell No.) | | | | |
| 4. Email Ad | ddress: | | | | | | | |
| | | | | | | | | |
| EDUCATION | l: Check approp | riate box if you po | ssess one of the f | ollowing: | | | | |
| igh School Dip | oloma 🗹 G.E.D. | Certificate C | alifornia High Scho | ool Proficiency Ce | rtificate | | | |
| | | | _ | _ | | | | |

| Names of colleges / universities attended | Course of Study / Major | Degree Awarded | Units Completed | | Degree Type | Date Degree Awarded |
|---|---------------------------------|-----------------------|-----------------|--------------------------------|----------------|---------------------------|
| | | | Semester | Quarter | | |
| A) Diablo Valley College | AS | Yes No 🔽 | 4 | | | |
| B) | | Yes No | | | | |
| C) | | Yes No | | | | |
| Other schools / training completed: Flight Training | Course Studied Private Pilot | Hours Completed 65 | | Certificate Awarded: Yes No | | |

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) From To 04/2013 Present Total: Yrs. Mos. 3 6 Hrs. per week 40 . Volunteer | Title Director of Operations Employer's Name and Address Sterling Aviation 145 John Glenn Drive Concord, CA 94520 | Duties Performed I run multiple departments and oversee a staff of 20 personnel directly relating to aviation. I run the flight school and flight line services departments. |
|--|---|--|
| B) Dates (Month, Day, Year) From To 10/1/2011 03/31/2012 Total: Yrs. Mos. 6 Hrs. per week 40 . Volunteer □ C) Dates (Month, Day, Year) From To 04/15/10 07/1/11 Total: Yrs. Mos. | Title Line Service Dispatcher / CSR Employer's Name and Address APP Jet Center 19990 Skywest Drive Hayward, CA Title Line Service Technician Employer's Name and Address Bridgeford Flying Service 2030 Airport Road | Duties Performed While on shift it was my responsibility to track the flight line service technicians, receive orders from flight crews and dispatch available resources as needed. I interacted heavily with flight crews and private jet aircraft owners. Duties Performed I worked the aircraft ramp parking, fueling, loading and unloading private jet aircraft. NATA Safety 1st trained |
| 1 3 Hrs. per week 40 . Volunteer □ D) Dates (Month, Day, Year) From To 12/2008 12/2009 Total: Yrs. Mos. Hrs. per week Volunteer ✓ | Title Guest Speaker Employer's Name and Address Make-a-wish foundation Greater bay area chapter | Duties Performed After surviving cancer and receiving wish from the greater bay area chapter of the Make-A-Wish organization, I was invited to be a guest speaker at their Wine and Wishes event. The event raises over \$1 Million for the organization. |

| 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 Contra Costa County. |
| Sign Na Date: |
| 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. Marting datas and times are publicated about a control of the days per month
- 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.