

MAIL OR DELIVER TO: Contra Costa County CLERK OF THE BOARD For Office Use Only
Date Received:

For Reviewers Use Only: Accepted Rejected

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

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: Advisory Council on Equal Employment Opportu PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION PRINT EXACT SEAT NAME (if applicable) 1. Name: CORMIER Joseph Keith (Middle Name) (Last Name) (First Name) 2. Address: (No.) (Street) (Apt.) (City) (State) (Zip Code) 3. Phones: (Home No.) (Work No.) (Cell No.) kcorm@cccfpd.org 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 📋 Associate of Arts Degree Give Highest Grade or Educational Level Achieved

Date Degree Names of colleges / universities Degree Course of Study / Major **Units Completed** Degree Awarded attended Type Awarded Semester Quarter Yes No X AA 5/27/05 Fire Technology Los Medanos College B) Yes No C) Yes No Course Studied **Hours Completed** Certificate Awarded: D) Other schools / training Yes No completed:

THIS FORM IS A PUBLIC DOCUMENT

RECEIVED

By bscott at 7:58 am, Nov 16, 2016

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 To | Battalion Chief | |
| Apr. 2008 present | | |
| Total: Yrs. Mos. | Employer's Name and Address | Management and oversight of day to |
| | ji j | day fire department operations for specified geographical area. |
| 3 yrs. 6 mo. | l ! | specified geographical area. |
| Hrs. per week 56 . Volunteer | i. | |
| | 9 | |
| B) Dates (Month, Day, Year) | Title | Duties Performed |
| From To | Fire Captain, Fire Engineer, Firefighter | |
| Jan. 1988 Apr. 2008 | | |
| Total: <u>Yrs. Mos.</u> | Employer's Name and Address | Task oriented duties providing fire |
| | | department services to Contra Costa |
| 20 yrs. 2 mo. | it Ne. | County citizens within the jurisdiction of the Fire District. |
| Hrs. per week 56 . Volunteer | | - |
| | 7 142 (20 × 20 × | |
| | | |
| 0) D-1 (M | - | - : - B (|
| C) Dates (Month, Day, Year) | Title | Duties Performed |
| C) Dates (Month, Day, Year) From To | Title | Duties Performed |
| | | Duties Performed |
| | Title Employer's Name and Address | Duties Performed |
| From To | | Duties Performed |
| From To Total: Yrs. Mos. | | Duties Performed |
| From To | | Duties Performed |
| From To Total: Yrs. Mos. Hrs. per week Volunteer | Employer's Name and Address | - 43 |
| From To Total: Yrs. Mos. Hrs. per week Volunteer D) Dates (Month, Day, Year) | | Duties Performed Duties Performed |
| From To Total: Yrs. Mos. Hrs. per week Volunteer | Employer's Name and Address | - 43 |
| From To Total: Yrs. Mos. Hrs. per week Volunteer D) Dates (Month, Day, Year) | Employer's Name and Address Title | - 43 |
| From To Total: Yrs. Mos. Hrs. per week Volunteer D) Dates (Month, Day, Year) | Employer's Name and Address | - 43 |
| Total: Yrs. Mos. Hrs. per week Volunteer D) Dates (Month, Day, Year) From To | Employer's Name and Address Title | - 43 |
| Total: Yrs. Mos. Hrs. per week Volunteer D) Dates (Month, Day, Year) From To Total: Yrs. Mos. | Employer's Name and Address Title | - 43 |
| Total: Yrs. Mos. Hrs. per week Volunteer D) Dates (Month, Day, Year) From To | Employer's Name and Address Title | - 43 |

THIS FORM IS A PUBLIC DOCUMENT

| 7. How did you learn about this vacancy? | _ |
|---|---|
| □CCC Homepage Walk-In ■Newspaper Advertisement ■District Supervisor ▼Other incumbent | |
| 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 | |
| 9. Do you have any financial relationships with the County such as grants, contracts, or other economic relations? No X Yes T 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 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 on a Board, Committee, or Commission in Contra Costa County. | |
| Sign Name: Date: Date: 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. 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

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.

THIS FORM IS A PUBLIC DOCUMENT