



For Reviewers Use Only: Rejected Accepted

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: Consumer/Consumer Advocate Council on Homelessness PRINT EXACT SEAT NAME (if applicable) PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION 1. Name: Batchelor M Stephanie (First Name) (Middle Name) (Last Name) Martinez CA 94553 2. Address: (State) (Zip Code) (Street) (City) (No.) (Apt.) 3. Phones: (Cell No.) (Work No.) (Home 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 Senior in College Date Degree Names of colleges / universities Degree Course of Study / Major Units Completed Degree Awarded Type attended Awarded Semester Quarter A) Univercity Of Pheonix Human Services 2017 Yes No 🗆 🔀 80 BS Management B) Yes No C) Yes No Hours Completed Certificate Awarded: Course Studied D) Other schools / training Yes No X completed:

9 units

Spirit Program

Contra Costa College

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	Homeless	Lived on the streets for 3 months then
4/2004 7/2008		in and out of shelter. Received my own housing in July of 2008. Where I
Total: <u>Yrs.</u> <u>Mos.</u>	Employer's Name and Address	moved to Martinez
4 3		
Hrs. per week . Volunteer		
B) Dates (Month, Day, Year)	Title	Duties Performed
From To	Homeless Peer Counselor	Provide peer support, Conflict resolution, do intakes, hold meetings,
12/2010 1/2012		serve meals, clean facility
Total: <u>Yrs.</u> <u>Mos.</u>	Employer's Name and Address Grerater Richmond Interfaith Program	
2	847 C Brookside Dr	
	Richmond Ca 94801	
Hrs. per week 40 . Volunteer		
C) Dates (Month, Day, Year)	Title	Duties Performed
C) Dates (Month, Day, Year) From To	Title Consumer Specialist	At6tend many stakeholder meetings
From To	Title Consumer Specialist	Atótend many stakeholder meetings with homeless consumers, advocate
From To 1/2012 1/2014	Consumer Specialist Employer's Name and Address	At6tend many stakeholder meetings
From To	Consumer Specialist Employer's Name and Address Greater Richmond Interfaith Program	Atótend many stakeholder meetings with homeless consumers, advocate for consumers, facilitate meetings for
From To 1/2012 1/2014	Consumer Specialist Employer's Name and Address	Atótend many stakeholder meetings with homeless consumers, advocate for consumers, facilitate meetings for
From To 1/2012 1/2014 Total: Yrs. Mos. 2 0	Consumer Specialist Employer's Name and Address Greater Richmond Interfaith Program 2047 Arnold Industrial Way	Atótend many stakeholder meetings with homeless consumers, advocate for consumers, facilitate meetings for
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From To 1/2012 1/2014 Total: Yrs. Mos. 2 0 Hrs. per week 40 . Volunteer	Employer's Name and Address Greater Richmond Interfaith Program 2047 Arnold Industrial Way Concord Ca 94520 Title	Atótend many stakeholder meetings with homeless consumers, advocate for consumers, facilitate meetings for homeless consumers Duties Performed Locate housing opportunity for
From To 1/2012 1/2014 Total: Yrs. Mos. 2 0 Hrs. per week 40 . Volunteer D) Dates (Month, Day, Year) From To	Employer's Name and Address Greater Richmond Interfaith Program 2047 Arnold Industrial Way Concord Ca 94520 Title Housing Specialist	Atótend many stakeholder meetings with homeless consumers, advocate for consumers, facilitate meetings for homeless consumers
From To 1/2012 1/2014 Total: Yrs. Mos. 2 0 Hrs. per week 40 . Volunteer D) Dates (Month, Day, Year) From To 1/14 6/15	Employer's Name and Address Greater Richmond Interfaith Program 2047 Arnold Industrial Way Concord Ca 94520 Title Housing Specialist Employer's Name and Address	Atótend many stakeholder meetings with homeless consumers, advocate for consumers, facilitate meetings for homeless consumers Duties Performed Locate housing opportunity for consumers, case manage consumers, assist consumers in savings plan, develope housing plan, develop
From To 1/2012 1/2014 Total: Yrs. Mos. 2 0 Hrs. per week 40 . Volunteer D) Dates (Month, Day, Year) From To	Employer's Name and Address Greater Richmond Interfaith Program 2047 Arnold Industrial Way Concord Ca 94520 Title Housing Specialist Employer's Name and Address Public Health Foundation Enterprises	Atótend many stakeholder meetings with homeless consumers, advocate for consumers, facilitate meetings for homeless consumers Duties Performed Locate housing opportunity for consumers, case manage consumers, assist consumers in savings plan,
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/. How did you learn about this vacancy?
□CCC Homepage Walk-In Newspaper Advertisement District Supervisor Other was previous 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 X Yes Yes 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:

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 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.