

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 Aging
PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION

City of Orinda Representative
PRINT EXACT SEAT NAME (If applicable)

1. Name: Clark, Nina
(Last Name) (First Name) (Middle Name)
2. Address: [REDACTED]
(No.) (Street) (Apt.) (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 Ph.D.

Names of colleges / universities attended	Course of Study / Major	Degree Awarded	Units Completed		Degree Type	Date Degree Awarded
			Semester	Quarter		
A) UC San Diego		Yes No <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>				
B) University of Southern California	Political Science	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>			BA	1989
C) University of Southern California	Pol. Sci. / Gerontology	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>			MA/Ph.D.	1994

Hrs. per week <u>5</u> . Volunteer <input type="checkbox"/>	Berkeley, CA		
B) Dates (Month, Day, Year) From <u>2007</u> To <u>2008</u> Total: Yrs. <u>1</u> Mos. Hrs. per week <u>5-10</u> . Volunteer <input type="checkbox"/>	Title <u>Online Learning Instructor</u> Employer's Name and Address <u>Univ. of Bridgeport</u> <u>Bridgeport, CT</u>	Duties Performed <u>Taught American Government and American Political Parties</u>	
C) Dates (Month, Day, Year) From <u>1996</u> To <u>1999</u> Total: Yrs. <u>3</u> Mos. Hrs. per week <u>10</u> . Volunteer <input type="checkbox"/>	Title <u>Adjunct Assistant Professor</u> Employer's Name and Address <u>Univ. Bridgeport</u> <u>Bridgeport, CT</u>	Duties Performed <u>Adult Continuing Ed. Program (IDEAL)</u> <u>Taught many Political Science courses.</u>	
D) Dates (Month, Day, Year) From <u>1995</u> To <u>2000</u> Total: Yrs. Mos.	Title <u>Director, GE Scholars Program</u> Employer's Name and Address <u>Sacred Heart Univ.</u>	Duties Performed <u>Managed multi-cultural scholar-ship program.</u>	

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: _____

8/15/17

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.