## **Application Form**

Advisory Council on Aging

Submit Date: May 21, 2017 Advisory Council on Aging: Submitted

## **Profile** This application is used for all boards and commissions Jagjit Bhambra Last Name First Name Middle Initial **Email Address** Home Address Suite or Apt 94547 Hercules CA City State Postal Code Primary Phone Retired Job Title Employer Occupation Do you, or a business in which you have a financial interest, have a contract with Contra Costa Co.? ○ Yes ⊙ No Is a member of your family (or step-family) employed by Contra Costa Co.? **Interests & Experiences** Which Boards would you like to apply for?

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Please describe your interest in serving as a member of the board(s) you have selected and if applicable which seat you are applying for. As a past Executive Director, Atria Senior Living community at Lafayette, I have a passion for serving the senior community. Have you previously served on a government or non-profit board or committee? Yes. Community Services Commissioner, City of Hercules Please describe how your education, work experience, or other activities have prepared you to serve on the board or commission you have selected. My service as an Executive Director of Senior Living community (current holder of Residential Care Facility for Elderly - Administrator's License) and as a retired County employee (MPA Degree) and the advocate for seniors, I think I am qualified to serve on the Advisory Council on Aging. Upload a Resume **Education History** Other Select the highest level of education you have received: Master of Public Administration If "Other" was Selected Give Highest Grade or Educational Level Achieved College/ University A National University, San Diego Name of College Attended MPA Course of Study / Major Units Completed

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Type of Units Completed

Degree Awarded?	
⊙ Yes ○ No	
MPA	
Degree Type	
Date Degree Awarded	
College/ University B	
Name of College Attended	
Course of Study / Major	
Units Completed	
Type of Units Completed	
Degree Awarded?	
o Yes o No	
Degree Type	
Date Degree Awarded	
College/ University C	
Name of College Attended	
Course of Study / Major	

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Units Completed	
Type of Units Completed	
Degree Awarded?	
C Yes C No	
Degree Type	
Date Degree Awarded	
Other schools / training completed:	
Course Studied	
Hours Completed	
Certificate Awarded?	
o Yes o No	
Work History	
Please provide information on your last three positions, including your current one if yo	u aro
Please provide information on your last three positions, including your current one if your working.	iu ale
1st (Most Recent)	
11/14/17 - 5/3/17  Dates (Month, Day, Year) From - To	
Dates (Month, Day, 16al) 110111-10	
40	
Hours per Week Worked?	

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Volunteer Work?
○ Yes    ○ No
Executive Director Position Title
Employer's Name and Address
Atria Park of Lafayette 1545 Pleasant Hill Rd Lafayette, CA 94549
Duties Performed
Manage the Senior Assisted Living community as it's Executive Director
2nd
06/05/1995 - 10/31/16  Dates (Month, Day, Year) From - To
40 Hours per Week Worked?
Volunteer Work?
C Yes    No
Contra Costa County/EHSD/HSD Position Title
Employer's Name and Address
Contra Costa County 651 Pine St Martinez, CA 94553
Duties Performed
ASA III/EWS I
3rd

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Dates (Month, Day, Year) From - To

Hours per Week Worked?
Volunteer Work?
○ Yes ○ No
Position Title
Employer's Name and Address
Duties Performed
Final Questions
Contra Costa County Homepage  How did you learn about this vacancy?
If "Other" was selected please explain
. Do you have a Familial or Financial Relationship with a member of the Board of Supervisors?
○ Yes    ○ No
If Yes, please identify the nature of the relationship:
Do you have any financial relationships with the County such as grants, contracts, or other economic relations?
○ Yes ⊙ No
If Yes, please identify the nature of the relationship:

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