



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

(Each Position Requires a Separate Application)

BOARD, COMMITTEE	OR COMMISSION NAME	AND SEAT TITLE VOLL	ARE ARRIVING FOR
DOMIND, COMMINITIEE	OU COMMISSION MANAGE	AND SEAT THE YOU	AKE APPLYING FOR.

PRINT EXACT NAME OF BOARD, COMMITT	EE, GR COMMISSION	PRINT EX	ACT SEAT NAME	(if applicable)		
1. Name: WAZZZZ		acep		( applicable)		
(Last Name)	(First N			(1)	Middle Nai	me)
2. Address:						ide)
3. Phones:						
4. Email Address: _	THE ARMOUNT OF THE BARRIES OF					
High School Diploma G.E.D.  Give Highest Grade or Education  Names of colleges / universities attended		Degree Awarded	Units Co	mpleted	Degree Type	Date Degree Awarded
A) U.C. Beauerey	Pouricae Science	Yes No 🗹	Semester	Quarter	BA	6.1968
B)		Yes No 🔲				
C)		Yes No 🔲			Action corrued	
D) Other schools / training completed:  で メ て	Course Studied TRAUSCR. PIS ON REGUEST	Hours Cor	npleted		Prificate Aw Yes No ア ムンソ	

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
<u>From</u> <u>To</u>	PRUPRIE TOR	EUE RYTHIUL FROM
From To 9/1992 PRESENT		BUSINESS DEJEWPHEN
	Employer's Name and Address	
Total: <u>Yrs.</u> <u>Mos.</u>	CHARLES B.	to corrections
	WARREN, MRICS,	WITH TRESCAPENT
	WARREN, MRICS, ASA (urow TRP)	REPOSTAGE &
Hrs. per week 40 1/2 Volunteer	29 PHULIE Da.	REPOSTION &
volunteer Volunteer	29 PHYLIC Da. PLEASONT HILL, CA	TESTINDBY IN
	1 LEASON HILL, CA	BETWEEN
B) Dates (Month, Day, Year)	Title	Duties Performed
From To Present	Privage Pins	P. LOT 10
3-3-03 KUEREN	PRIVATE PILOT	Commado
	Employer's Name and Address	
Total: <u>Yrs.</u> <u>Mos.</u>	pieyer e Name and Adaress	
14 7	SE-6	
Toron 400+ /	,	
Hrs. per week		
C) Dates (Month, Day, Year)	Title	Duties Performed
<u>From</u> <u>To</u>		
	Employer's Name and Address	
Total: <u>Yrs.</u> <u>Mos.</u>	Employer's Name and Address	
Hrs. per week Volunteer 🔲		
· ind. per week Volunteer	I	
D) Dates (Month, Day, Year)	Title	Duties Performed
D) Dates (Month, Day, Year) From To	Title	Duties Performed
	Title	Duties Performed
<u>From</u> <u>To</u>	Title  Employer's Name and Address	Duties Performed
		Duties Performed
<u>From</u> <u>To</u>		Duties Performed
<u>From</u> <u>To</u>		Duties Performed
<u>From</u> <u>To</u>		Duties Performed

7. How did you learn about this vacancy?
□CCC Homepage Walk-In Newspaper Advertisement District Supervisor Other ★ PASTOR
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
I AM AUDILABLE FOR ON-CACL
If Yes, please identify the nature of the relationship: DPODIS DC BEQUICER TO
If Yes, please identify the nature of the relationship: DPRAISAC BERUICER TO THE AIRPORT (BUT HAVEH'T
BERD CALLED)
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.





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MARTINEZ, CA

94553-1292

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