



Contra Costa County

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SEP 06 2018
CLERK BOARD OF SUPERVISORS
CONTRA COSTA

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Date Received:

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 YOU ARE APPLYING FOR:

ADVISORY COUNCIL ON AGING
PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION
PRINT EXACT SEAT NAME (if applicable)

1. Name: WELTY PATRICIA DeLores
(Last Name) (First Name) (Middle Name)
2. Address: [Redacted]
(No.) (Street) (Apt.) (City) (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 B.S. RECREATION

Names of colleges / universities attended	Course of Study / Major	Degree Awarded Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>	Units Completed		Degree Type	Date Degree Awarded
			Semester	Quarter		
A) The OHIO STATE UNIVERSITY	EDUCATION	Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>				
B) CA. STATE UNIVERSITY, HAYWARD	RECREATION	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>			B.S.	3-1973
C)		Yes No <input type="checkbox"/> <input type="checkbox"/>				
D) Other schools / training completed:	Course Studied	Hours Completed	Certificate Awarded: Yes No <input type="checkbox"/> <input type="checkbox"/>			

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.

<p>A) Dates (Month, Day, Year) From <u>7-1976</u> To <u>6-present</u> Total: Yrs. <u>42</u> Mos. <u> </u> Hrs. per week <u>30</u> . Volunteer <input checked="" type="checkbox"/></p>	<p>Title <u>TEACHER</u> <u>ADULT EDUCATION</u> Employer's Name and Address <u>PITTSBURG ADULT EDUC.</u> <u>STONEMAN AVE.</u> <u>PITTSBURG, CA, 94565</u></p>	<p>Duties Performed <u>Taught in Adults w/ Disabilities with 4 school districts, until our programs were cancelled. I am currently the Dept. Chair for Life-Long Learning at Pittsburg Adult Education</u></p>
<p>B) Dates (Month, Day, Year) From <u> </u> To <u> </u> Total: Yrs. <u> </u> Mos. <u> </u> Hrs. per week <u> </u> . Volunteer <input type="checkbox"/></p>	<p>Title <u> </u> Employer's Name and Address <u> </u></p>	<p>Duties Performed <u> </u></p>
<p>C) Dates (Month, Day, Year) From <u> </u> To <u> </u> Total: Yrs. <u> </u> Mos. <u> </u> Hrs. per week <u> </u> . Volunteer <input type="checkbox"/></p>	<p>Title <u> </u> Employer's Name and Address <u> </u></p>	<p>Duties Performed <u> </u></p>
<p>D) Dates (Month, Day, Year) From <u> </u> To <u> </u> Total: Yrs. <u> </u> Mos. <u> </u> Hrs. per week <u> </u> . Volunteer <input type="checkbox"/></p>	<p>Title <u> </u> Employer's Name and Address <u> </u></p>	<p>Duties Performed <u> </u></p>

7. How did you learn about this vacancy?

CCC Homepage Walk-In Newspaper Advertisement District Supervisor Other ACOA currently
servicing

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

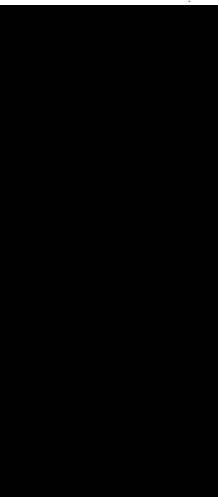
If Yes, please identify the nature of the relationship:

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: Patricia DeLores Welty Date: Aug. 10, 2018

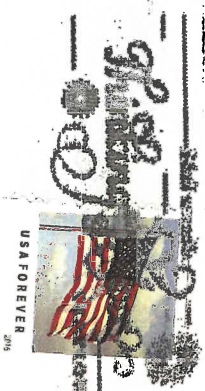
Important Information

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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OAKLAND CA 945
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Office of the Clerk of the Board

1651 Pine Street, Room 106

Menlo Park, California 94025