



**Contra
Costa
County**

Please return completed applications to:

Clerk of the Board of Supervisors

651 Pine St., Room 106

Martinez, CA 94553

or email to: ClerkofTheBoard@cob.cccounty.us

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION - DRAFT

First Name

Last Name

Home Address - Street

City

Zip Code

Phone (best number to reach you)

Email

Resident of Supervisorial District:

Education: Please check all that apply

☐ High School

☐ College Degree

☐ Masters Degree

☐ Doctoral Degree (including M.D., J.D., Ph.D., and others)

☐ Other Degree (please specify)

☐ Other Professional Certifications (please specify)

Board, Committee or Commission Name

Seat Name

Have you ever attended a meeting of the advisory board for which you are applying?

☐ No

☐ Yes

If yes, how many?

Please explain why you would like to serve on this particular board, committee, or commission.

Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume with this application)

I am including my resume with this application

Please check one:

☐ Yes

☐ No

Are you currently or have you ever been appointed to a Contra Costa County advisory board?

Please check one:

☐ Yes

☐ No

List any volunteer and community experience, including any advisory boards on which you have served.

Do you have a familial relationship with a member of the Board of Supervisors? (Please refer to the relationships listed below or Resolution no. 2011/55)

☐ 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 relationships? ☐ Yes ☐ No

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 publicly accessible. I understand and agree that misstatements and/or omissions of material fact may cause forfeiture of my rights to serve on a Board, Committee, or Commission in Contra Costa County.

Signed: _____

Date: _____

Submit this application to:

Clerk of the Board of Supervisors
651 Pine St., Room 106
Martinez, CA 94553

Questions about this application? Contact the Clerk of the Board at (925) 335-1900 or by email at ClerkofTheBoard@cob.cccounty.us

Important Information

1. This application and any attachments you provide to it is a public document and is subject to the California Public Records Act (CA Gov. Code §6250-6270).
2. All members of appointed bodies are required to take the advisory body training provided by the Contra Costa County.
3. Members of certain 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.
4. Meetings may be held in various locations and some locations may not be accessible by public transportation.
5. Meeting dates and times are subject to change and may occur up to two days per month.
6. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.
7. As indicated in Board Resolution 2011/55, 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: Mother, father, son, daughter. Brother, sister, grandmother, grandfather, grandson, and granddaughter. Great-grandfather, great-grandmother, aunt, uncle, nephew, niece, great-grandson, and great-granddaughter; first-cousin; husband, wife, father-in-law, mother-in-law, daughter-in-law, stepson, stepdaughter; sister-in-law, brother-in-law, spouse's grandmother, spouse's grandfather, spouse's granddaughter, and
8. A person will not be eligible to serve if the person shares a financial interest as defined in Gov't Code Section 87103 with a Board of Supervisors Member.