



Contra  
Costa  
County

RECEIVED  
JUL 16 2015  
CLEAN BOARD OF SUPERVISORS  
CONTRA COSTA CO.

For Office Use Only  
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:

Economic Opportunity Council

Committee Commissioner

PRINT EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION

PRINT EXACT SEAT NAME (if applicable)

1. Name: Sewell Devlyn Elizabeth  
(Last Name) (First Name) (Middle Name)

2. Address: [Redacted] Concord CA 94521  
(No.) (Street) (Apt.) (City) (State) (Zip Code)

3. Phones: [Redacted] NA [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 16

Names of colleges / universities attended	Course of Study / Major	Degree Awarded	Units Completed		Degree Type	Date Degree Awarded
			Semester	Quarter		
A) Contra Costa College	Nursing LVN	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>			A.S.	1982
B) Contra Costa College	Biological Science	Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>			A.S.	1982
C) Contra Costa College		Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>			A.S.	1982
D) Other schools / training completed: IBEW Local 302 Inside Wireman	Course Studied 4 year union apprenticeship	Hours Completed 4,000	Certificate Awarded: Yes No <input checked="" 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            To  <input type="text" value="3/27/2007"/>    <input type="text" value="7/15/15"/>            Total: Yrs.    Mos.  <input type="text" value="8"/>            <input type="text" value="3"/>            Hrs. per week <input type="text" value="2+"/> . Volunteer <input checked="" type="checkbox"/></p>	<p>Title  <input type="text" value="Community Service Commissioner"/>            Employer's Name and Address  <input type="text" value="City of Concord"/>  <input type="text" value="1975 Parkside Drive"/>  <input type="text" value="Concord, Ca 94519"/></p>	<p>Duties Performed  <input type="text" value="Review grant applications from various non profits applying for funding."/>  <input type="text" value="Analyzed service data to provide funding recommendations to City Council"/></p>
<p>B) Dates (Month, Day, Year)            From            To  <input type="text" value="6/13/2013"/>    <input type="text" value="7/15/2015"/>            Total: Yrs.    Mos.  <input type="text" value="2"/>            <input type="text" value="1"/>            Hrs. per week <input type="text" value="2+"/> . Volunteer <input checked="" type="checkbox"/></p>	<p>Title  <input type="text" value="Comm. Mt. Diablo Health Care District"/>            Employer's Name and Address  <input type="text" value="City of Concord"/>  <input type="text" value="1975 Parkside Drive"/>  <input type="text" value="Concord, Ca 94519"/></p>	<p>Duties Performed  <input type="text" value="Review grant applications from various non profits applying for funding."/>  <input type="text" value="Analyzed service data to provide funding recommendations to City Council"/></p>
<p>C) Dates (Month, Day, Year)            From            To  <input type="text" value="6/6/2000"/>        <input type="text" value="11/17/2002"/>            Total: Yrs.    Mos.  <input type="text" value="2"/>            <input type="text" value="5"/>            Hrs. per week <input type="text" value="2+"/> . Volunteer <input checked="" type="checkbox"/></p>	<p>Title  <input type="text" value="Commissioner Status of Women"/>            Employer's Name and Address  <input type="text" value="City of Concord"/>  <input type="text" value="1975 Parkside Drive"/>  <input type="text" value="Concord, Ca 94519"/></p>	<p>Duties Performed  <input type="text" value="Committee reviewed and assessed the needs of women in our community."/>  <input type="text" value="Provided assessment back to the City Council for elevating their economic and educational opportunities."/>  <input type="text"/></p>
<p>D) Dates (Month, Day, Year)            From            To  <input type="text"/>            <input type="text"/>            Total: Yrs.    Mos.  <input type="text"/>            <input type="text"/>            Hrs. per week <input type="text"/> . Volunteer <input type="checkbox"/></p>	<p>Title  <input type="text"/>            Employer's Name and Address  <input type="text"/></p>	<p>Duties Performed  <input type="text"/></p>

7. How did you learn about this vacancy?

CCC Homepage  Walk-In  Newspaper Advertisement  District Supervisor  Other Ajit Kaushal

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: [REDACTED] Date: 7/13/15

**Important Information**

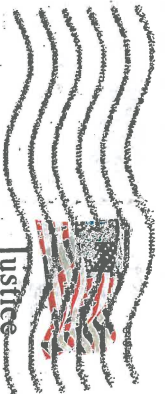
1. This application is a public document and is subject to the California Public Records Act (CA Gov. Code §6250-6270).
2. Send the completed paper application to the Office of the Clerk of the Board at: **651 Pine Street, Room 106, Martinez, CA 94553.**
3. A résumé or other relevant information may 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.



Devlyn Sewell  
4007 Roland Dr.  
Concord, CA 94521

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CONTRA COSTA CO.

OAKLAND CA 946  
24 JUL 2015 PM 3 L



C.C.C. Clerk of the Board  
651 Pine St.  
Martinez, Ca 94553-1292  
Room 106

94553129299

