Application Form

Profile				
Erika	K	Sheranko		
First Name	Middle Initial	Last Name		
Home Address			Suite or Apt	
Antioch			CA	94531
City			State	Postal Code
Primary Phone				
Email Address				
Which supervisorial district do	o you live in	?		
☑ District 3				
Education				
Select the option that applies	to your high	school education	1*	
College/ University A				
Name of College Attended				
Axia College				
Degree Type / Course of Study	y / Major			
AA Communications				
Degree Awarded?				
⊙ Yes ○ No				
College/ University B				
Name of College Attended				
Liberty University				

Submit Date: Oct 16, 2019

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Degree Type / Course of Study / Major
Religion
Degree Awarded?
○ Yes ⊙ No
College/ University C
Name of College Attended
Degree Type / Course of Study / Major
Degree Awarded?
C Yes C No
Other schools / training completed:
Course Studied
Hours Completed
Certificate Awarded?
o Yes o No
Board and Interest
Which Boards would you like to apply for?
Alcohol and Other Drugs Advisory Board: Submitted
Seat Name
Have you ever attended a meeting of the advisory board for which you are applying?
○ Yes ⊙ No
If you have attended, how many meetings have you attended?
(plan to attend 10/23)

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commission. I have been sober since March 30, 2015. I love recovery and see so much hurt and the cycle of addiction within our community, I want to do something to help on a bigger scale. **Qualifications and Volunteer Experience** I would like to be considered for appointment to other advisory boards for which I may be qualified. Yes ○ No Are you currently or have you ever been appointed to a Contra Costa County advisory board, commission, or committee? ○ Yes ⊙ No List any volunteer or cummunity experience, including any advisory boards on which you have served. Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume with this application) Sober since 2015, attend 12 step, live n the community, have used drugs and alcohol as well as been sober in the community. Unload a Resume **Conflict of Interest and Certification** 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:

Please explain why you would like to serve on this particular board, commitee, or

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Please Agree with the Following Statement

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 undersand that all information in this application is publicly accessible. I understand 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.

☑ I Agree

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