Application Form

Profile				
Michelle		Walker		
First Name	Middle Initial	Last Name		
Home Address			Suite or Apt	
richmond			CA	94804
City			State	Postal Code
Primary Phone				
Email Address				
Which supervisorial district do	you live in?			
District 1				
Education				
Select the option that applies	to your high	school education	*	
	o your mgm			
☑ G.E.D. Certificate				
College/ University A				
Name of College Attended				
Michelle Walker				
Degree Type / Course of Study	/ / Major			
Degree Awarded?				
○ Yes ⊙ No				
College/ University B				
Name of College Attended				
Degree Type / Course of Study	/ / Major			

Submit Date: Sep 17, 2019

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Degree Awarded?
○ Yes ⓒ No
College/ University C
Name of College Attended
Degree Type / Course of Study / Major
Degree Awarded?
⊙ Yes ⊙ No
Other schools / training completed:
Course Studied
Rubicon
Hours Completed
2yrs
Certificate Awarded?
⊙ Yes ○ No
Board and Interest
Which Boards would you like to apply for?
Contra Costa Council on Homelessness: Submitted Commission for Women: Submitted Housing Authority - BOS Appointees: 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?
Please explain why you would like to serve on this particular board, commitee, or commission.

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Homeless council for reentry To help my community thrive

Qualifications and Volunteer Experience
I would like to be considered for appointment to other advisory boards for which I may be qualified.
C 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.
Fellow in the Richard Boyd fellowship Feed the homeless at grip Mom's against Violence Alpha program
Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume with this application)
I am currently homeless
Upload a Resume
Conflict of Interest and Certification
Connect 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:

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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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