## **Application Form**

Profile				
Chown		Carles		
Shawn First Name	Middle Initial	Corke Last Name		
Home Address			Suite or Apt	
Concord City			CA State	94519 Postal Code
			Oldio	. 6614. 6646
Primary Phone				
Email Address				
Which supervisorial district do	you live in	?		
District 4				
Education				
Select the option that applies	to your high	school education	n *	
College/ University A				
Name of College Attended				
City College of San Francisco				
Degree Type / Course of Study	//Major			
	, / Majoi			
Administration of Justice				
Degree Awarded?				
College/ University B				
Name of College Attended				
Degree Type / Course of Study	/ / Major			

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Degree Awarded?
c Yes c No
College/ University C
Name of College Attended
Degree Type / Course of Study / Major
Degree Awarded?
○ Yes ○ No
Other schools / training completed:
Course Studied
Hours Completed
Certificate Awarded?
○ Yes ○ No
Board and Interest
Which Boards would you like to apply for?
Regional Measure 3 Independent Oversight Committee: 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.
I have an interest in learning how the government operates on the local level.

## **Qualifications and Volunteer Experience**

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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)
I am currently a sworn peace officer for a bay area county.
Upload 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:

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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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