



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**

First Name

SARA

Last Name

SHAFIABADY

Home Address - Street

[Redacted]

City

Walnut Creek

Zip Code

94596

Phone (best number to reach you)

[Redacted]

Email

[Redacted]

Resident of Supervisorial District:

[Redacted]

**EDUCATION**

Check appropriate box if you possess one of the following:

High School Diploma

CA High School Proficiency Certificate

G.E.D. Certificate

Colleges or Universities Attended	Course of Study/Major	Degree Awarded	
University of Illinois, Urbana	Tourism Management	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No

Other Training Completed:

Alz. Association Community Educator training; ElderCare Bootcamp; Our Aging Nation

Board, Committee or Commission Name

Advisory Council on Aging

Seat Name

[Redacted]

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

No

Yes If yes, how many?

[Redacted]

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

I hope to add value by sharing experiences from families I have served over nearly 10 years assisting seniors on both medical and non-medical care options. I provide education to seniors and professionals in the community to help them coordinate care to follow through on their wishes.

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

I have worked as a referral agent for 6.5 years, assisting families with research to connect with resources to meet care needs and budget. I also worked for hospice ~2 years and home care for almost a year. I have founded the Bay Area Chapter of the National Aging In Place Council to focus on advocating and educating seniors, families, and professionals.

I am including my resume with this application:

Please check one:

Yes

No

I would like to be considered for appointment to other advisory bodies for which I may be qualified.

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 boards on which you have served.

Volunteer education in Danville Senior Center / City of Orinda  
in Waterford  
Meals on wheels Fall Prevention Coalition  
Former Alzheimers Association Community Educator Volunteer

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)

Please check one:  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?

Please check one:  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:

[Redacted Signature]

Date:

2/1/2020

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](mailto: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 Government Code §6250-6270).
2. All members of appointed bodies are required to take the advisory body training provided by 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 (2) 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, granddaughter, great-grandfather, great-grandmother, aunt, uncle, nephew, niece, great-grandson, 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 spouses' grandson, registered domestic partner, relatives of a registered domestic partner as listed above.
8. A person will not be eligible to serve if the person shares a financial interest as defined in Government Code §87103 with a Board of Supervisors Member.