Application Form

Profile				
Darryl		Young		
First Name	Middle Initial	Last Name		
Home Address			Suite or Apt	
San Ramon			CA	94583
City			State	Postal Code
Primary Phone				
Email Address				
Which supervisorial dist	rict do you live in	?		
District 2				
Education				
Education				
Select the option that ap	plies to your high	school education	on *	
College/Heissessits A				
College/ University A	!			
Name of College Attende	ed 			
UC San Diego				
Degree Type / Course of	Study / Major			
Bioengineering				
Degree Awarded?				
⊙ Yes ⊜ No				
College/ University B				
Name of College Attende	ed			
Degree Type / Course of	Study / Major			

Submit Date: Oct 29, 2020

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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?			
C Yes C No			
Other schools / training completed:			
Course Studied			
Hours Completed			
Certificate Awarded?			
○ Yes ○ No			
Board and Interest			
Which Boards would you like to apply for?			
Mosquito & Vector Control District Board of Trustees (BoS Appointees Only): Submitted			
Seat Name			
Board Member			
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?			
Current Member			
Please explain why you would like to serve on this particular board, commitee, or commission.			

I enjoy serving on the board of trustees and I enjoy giving back to the community. I have a biological sciences background that has helped me understand the scientific discussions and I have historical context on the board to continue to help run the district.

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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 community experience, including any advisory boards on which you have served.
Contra Costa Mosquito and vector control district Library Advisory Committee Contra Costa Transportation Authority Citizens Advisory Committee
Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume with this application)
I enjoy serving on the board of trustees and I enjoy giving back to the community. I have a biological sciences background that has helped me understand the scientific discussions and I have historical context on the board to continue to help run the district.
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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