

## **Print Form**

Contra Costa County Please return completed applications to:

Clerk of the Board of Supervisors

1025 Escobar Street, 1st Floor

Martinez, CA 94553

or email to: ClerkofTheBoard@cob.cccounty.us

## BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

First Name	Last Name				
Mike		Awadalla		And an and a second	
Home Address - Street	City		Zip Code		
2223 CRIER BOOK	Walnut Creek		94598	94598	
Phone (best number to reach you)	Email				
V		menedala@ana	etrologier		
Resident of Supervisorial District:	4				
EDUCATION Check appropria   Image: Margin of the sector of the s		ss one of the follow I Proficiency Certifi		.D. Certificate	
Colleges or Universities Attended	Course of Study/Major		Degree Awarded		
San Francisco State University		Microbiology	Yes		
			🗆 Yes		
			🗆 Yes		
Other Training Completed:	Certified Senior Ad	visor (CSA)			
Board, Committee or Commission Nar	me	Seat Name	inio si ini period	1 AL	
		Wal nut Creek Se	aat		
Have you ever attended a meeting of	the eduicem hear			11/1	
From my work expirance for the about isuues that afect the elder			· · · · · · · · · · · · · · · · · · ·	lieuge	
Describe your qualifications for this applications for this applications for this applications for the statement of the state		E: you may also inc	lude a copy of		
I have a BS in Microbiology. I we was a 20 years in the restaurant all three in 2015 after my dad wa what got me in the senior care b 2018. Currently, I am the owner	t business. I owr as diagnosed wi business. I serve	ned three resatra th the Alzheimer d as a caregiver	ants in San Francisco 's disease. My dad's	. I have sole sickness is	
1 am including my resume with this ap Please check one:	pplication:	No No		x 1	
I would like to be considered for apport Please check one:		advisory bodies for □ No	which I may be qualifie	d.	

Are you currently or have you eve	r been appointed	to a Contra Costa C	County advisory board?	
Please check one:	🗆 Yes	No No		
List any volunteer and community	experience, inclu	iding any boards on	which you have served.	
I am a member of SMAC, Sei	nior Mobility Ac	tion Council.		
Do you have a familial relationship the relationships listed Please check one:	- 2 - 10 - 62a		ervisors? (Please refer to	
If Yes, please identify the			Mary Bruns	
Do you have any financial relation		-		
other economic relation		unty, such as grand	s, contracts, or	
Please check one:	Yes	No		
If Yes, please identify the	ne nature of the re	elationship:		
I CERTIFY that the statements mad knowledge and belief, and are mad application is publicly accessible. I cause forfeiture of my rights to set	de in good faith. I a understand and a	acknowledge and us gree that misstatem	nderstand that all information in t nents and/or ommissions of mate	this
Signed:			Date: $4/z$	2/2021
Submit this application to: Clerkof	TheBoard@cob.cc	1025	of the Board of Supervisors Escobar Street, 1st Floor tinez, CA 94553	
Questions about this app	lication? Contact	the Clerk of the Boa	rd at (925) 655-2000 or by email a	at
		Board@cob.cccount		
1. This application and any attachments yo Code §6250-6270).		ortant Informatio blic document and is sul		(CA Government
2. All members of appointed bodies are re	quired to take the adv	visory body training prov	vided by Contra Costa County.	
3. Members of certain boards, commission Form 700, and 2) complete the State Ethio	II FORMATING INC.	Received and a second second second	a Statement of Economic Interest Form a	also known as a
4. Meetings may be held in various location	ons and some location:	s may not be accessible	by public transportation.	
5. Meeting dates and times are subject to 6. Some boards, committees, or commissi				tional
commitment of time.				
7. As indicated in Board Resolution 2011/9 any of the following relationships: mother grandfather, great-grandmother, aunt, un mother-in-law, daughter-in-law, stepson, granddaughter, and spouses' grandson, re	r, father, son, daughte cle, nephew, niece, gr stepdaughter, sister-ir	r, brother, sister, grandr reat-grandson, great-gra n-ław, brother-in-law, sp	nother, grandfather, grandson, granddau nddaughter, first-cousin, husband, wife, f ouse's grandmother, spouse's grandfathe	ghter, great- ather-in-law,
8. A person will not be eligible to serve if t Member.	the person shares a fin	nancial interest as define	d in Government Code §87103 with a Boa	ard of Superviso

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