## **Application Form**

Profile				
Michael First Name		Vard Ist Name		
Home Address			Suite or Apt	
				0.45.40
Lafayette City			CA State	94549 Postal Code
Primary Phone				
Email Address				
<u>District Locator Tool</u>				
Resident of Supervisorial Dist	trict:			
☑ District 2				
Contra Costa County - Conservatorship / Guardianship Program Employer	Mental Health Support Work			
Length of Employment				
5 months				
Do you work in Contra Costa	County?			
⊙ Yes ⊜ No				
If Yes, in which District do you	u work?			
District 5				
How long have you lived or w	orked in Contra	Costa County?		
35 years				
Are you a veteran of the U.S.	Armed Forces?			
C Yes ⊙ No				
Board and Interest				
Which Boards would you like	to apply for?			
Alcohol and Other Drugs Advisory	Board: Submitted	<u> </u>		

Submit Date: Nov 05, 2021

Michael A Ward

Seat Name
At-Large Alternate Member
Have you ever attended a meeting of the advisory board for which you are applying?
⊙ Yes ○ No
If Yes, how many meetings have you attended?
3
Education
Select the option that applies to your high school education *
College/ University A
Name of College Attended
Loyola Marmount University
Degree Type / Course of Study / Major
Business Administation
Degree Awarded?
○ Yes ⊙ No
College/ University B
Name of College Attended
Contra Costa College
Degree Type / Course of Study / Major
SPIRIT Program
Degree Awarded?
⊙ Yes ○ No
College/ University C
Name of College Attended
Saint Mary's College

Degree Type / Course of Study / Major
Business Administration and Philosophy
Degree Awarded?
○ Yes ⊙ No
Other Trainings & Occupational Licenses
Other Training A
Certificate Awarded for Training?
C Yes C No
Other Training B
Certificate Awarded for Training?
○ Yes ○ No
Occupational Licenses Completed:
Qualifications and Volunteer Experience
Please explain why you would like to serve on this particular board, committee, or commission.
A few years ago I volunteered on the CCC Mental Health Commission as a MH Services Consumer Representative Commissioner, and it was an extremely rewarding experience where I felt I was able to contribute in a meaningful fashion. As a person who has personal experience with the justice system and addiction treatment programs in CCC, and is himself in recovery from active Substance Use Disorder, I am confident that I would be a useful board member.
Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume with this application)
I have a significant amount of personal and professional experience related to AOD field and issues; please refer to my attached resume for more specific details.
Upload a Resume
Would you like to be considered for appointment to other advisory bodies for which you may be qualified?
○ Yes ⊙ No

Do you have any obligations that might affect your attendance at scheduled meetings?
⊙ Yes ⊙ No
If Yes, please explain:
Are you currently or have you ever been appointed to a Contra Costa County advisory board?
⊙ Yes ⊙ No
If Yes, please list the Contra Costa County advisory board(s) on which you are currently serving:
If Yes, please also list the Contra Costa County advisory board(s) on which you have previously served:
Mental Health Commission
List any volunteer or community experience, including any advisory boards on which you have served.
Please refer to attached resume.
Conflict of Interest and Certification
Do you have a familial or financial relationship with a member of the Board of Supervisors? (Please refer to the relationships listed under the "Important Information" section below or Resolution No. 2021/234)
C 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?
⊙ Yes ○ No
If Yes, please identify the nature of the relationship:
I am employed with the County at the Conservatorship/Guardianship Program; however, I am not in a managerial role, nor does my position have much of anything to do with anything directly related to AOD field. I have already cleared volunteering with the AOD Board with my supervisors.

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

## <u>Important Information</u>

- 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 2021/234, 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:
  - (1) Mother, father, son, and daughter;
  - (2) Brother, sister, grandmother, grandfather, grandson, and granddaughter;
  - (3) Husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, stepson, and stepdaughter;
  - (4) Registered domestic partner, pursuant to California Family Code section 297;
  - (5) The relatives, as defined in 1 and 2 above, for a registered domestic partner;
  - (6) Any person with whom a Board Member shares a financial interest as defined in the Political Reform Act (Gov't Code §87103, Financial Interest), such as a business partner or business associate.

I had briefly discussed this with Jonel, but I wanted to confirm that it was indeed acceptable to both of you before proceeding with my application to the Board of Supervisors; I would like to volunteer to join as an at-large alternate board member on the AOD Advisory Board. They normally meet on the 3<sup>rd</sup> Wednesday of the month from 4pm-6pm; recently it has been hosted online so any potential impact on a regular workday would be minimal (I could take personal time off from the last half hour of the usual 8-4:30 shift as needed, or work a half hour earlier on that day- and if there happened to be an unforseen crunch in terms of CSW coverage and I was needed at work for a late court transport or whatnot, I could hypothetically skip an occasional AOD Board meeting, given that I would only be an at-large alternate board member, not the sole representative of a specific county district...)

A few years back I volunteered on the CCC Mental Health Commission as a MH Services Consumer Representative Commissioner, and it was an extremely rewarding experience where I felt I was able to contribute in a meaningful fashion. However, the AOD Board (versus the MHC) would be a larger step away from any potential (perceived or otherwise) conflict-of-interests; the time restraints would be less onerous, and as a person who is himself in recovery from active SUD, I am confident that I would be a useful board member.