View results

Respondent

29 Anonymous

18:54
Time to complete

About the Supplemental Questions for the Council on Homelessness Membership Application

The following questions will be used by the Council on Homelessness' Nominating Panel to identify diverse applicants that can contribute unique expertise and perspectives to the Council. Answers to these questions will be evaluated in relation to the experience and qualifications desired for available member seats. Please carefully consider how your personal experiences, professional experiences, and values will contribute meaningfully to the Council on Homelessness' and the Contra Costa County Homeless Continuum of Care's efforts to make homelessness rare, brief, and non-recurring.

Please note, there are two required elements of the Council on Homelessness application, these "Supplemental Questions" and the County Application. Once you submit this application, you will get an response that will include the link to the County Application. You must submit the County application by 5 pm Friday, September 30, 2022 to be considered.

REMINDER: ***To be considered for the Council, you must complete BOTH components of the application.***

Please note, this form can be filled out as a Word document and emailed to Council on Homelessness CChomelesscouncil@cchealth.org by the deadline or submitted via this online form.

Supplemental Questions

1. **Which vacant Council on Homelessness seat are you applying for?** *

- [ ] Affordable Housing Developer Representative
- [ ] Behavioral Health Representative
- [ ] City Government Representative
- [ ] Educational and Vocational Services Representative
- [ ] Emergency Solutions Grant Representative
- [ ] Health Care Representative
- [ ] Homeless Service Provider Representative
- [x] Lived Experience Advisor (must have lived experience of homelessness)
- [ ] Veterans Administration Representative
- [ ] Workforce Development Representative
- [ ] Youth Representative (must be between the ages of 18-24)

More options for Responses

2. **Please briefly describe any special skills, relationships, or resources you would bring to this specific seat. If applicable, please describe any experiences that demonstrate a past professional or personal commitment to addressing and alleviating homelessness within the topic or field related to the vacant seat.** (400 word maximum) *

I have experienced homelessness myself. I was homeless 25+ years ago but what I found was that it was hard to get out of it. There were so many obstacles. When I applied to look at apartments, they'd always ask about prior address but I didn't have one. I couldn't get any further on applications because of that fact.

3. **Please identify your personal connections with homelessness by selecting one of the options below:** *

- [ ] I am a person currently experiencing homelessness and living in a shelter or location not meant for human habitation (e.g., in a tent).
- [ ] I am a person who experienced homelessness within the past 5 years but is currently housed.
- [x] I am a person who experienced homelessness more than 5 years ago but is currently housed.
- [ ] I am a family member of someone who has experienced homelessness
- [ ] I am none of the above but still invested in addressing homelessness in Contra Costa County.
- [ ] I would prefer not to respond

4. **Individuals experiencing homelessness in Contra Costa County come from diverse backgrounds (in terms of abilities, ages, sexual and gender identities, immigration statuses, and racial, ethnic, and cultural backgrounds). Please describe your approach and experience working with and in diverse populations.** (400 words maximum) *

I've never treated anyone differently because of their race or ethic background. If you don't speak the same language, there might be a challenge. everyone who is homeless has the same needs, to be fed, clothing ,food a place to live.

5. **Please describe your affiliations with organizations or agencies who serve various homeless subpopulations such as: persons with chronic substance abuse issues, persons with serious mental illness, persons experiencing chronic homelessness, persons with HIV/AIDS, veterans, families with children, unaccompanied youth, victims of domestic violence, dating violence, sexual assault, and stalking, and seniors.** (400 word maximum) *

Most of my work with people experiencing homelessness has been with my friend Jack who has a homeless ministry. I used to be a fundraiser for NAMI.

6. **If applicable, please describe your affiliations with any government and community-based organizations that are not currently represented on the Council on Homelessness. For a full list of current Council on Homelessness members, please see here**: https://cchealth.org/h3/coc/council.php#Members **.** (400 word maximum) *

Not currently but was connected with Phoenix programs and Independent Living Resource (volunteer).

7. **Using your personal experiences and/or professional experiences, please describe up to three (3) ways you would encourage the Contra Costa Continuum of Care to address or set priorities for addressing homelessness. Feel free to draw from current events and other sources of information.** (400 word maximum) *

1) Housing. If you don't have housing, you can't really do anything else. People are worried about having their things stolen, worried about cities doing sweeps of encampments.
2) Assuring people that there are resources if they want help.
3)

8. **Please state how many Continuum of Care (CoC), Council on Homelessness (CoH), or Youth Advisory Council (YAC) meetings you have previously attended.** *

- [ ] 3 or more meetings
- [ ] 1-2 meetings
- [x] 0 meetings

9. **Please provide up to three (3) recommendations or thoughts you had from CoC, CoH, or YAC meetings. If you have not attended a CoC, CoH, or YAC meetings, please briefly describe any recent relevant participation in similar meetings and your recommendations or thoughts.** (400 word maximum) *

NAMI meetings- addressing homelessness as it connects to mental illness.

10. The Council is committed to the Housing First approach (meaning no barriers or requirements as a prerequisite to housing, including sobriety, religious affiliation, or other structure not required for housing) and has established this Guiding Principle: *Homelessness is first a housing issue, and necessary supports and services are critical to help people remain housed. Our system must be nimble and flexible enough to respond through the shared responsibility, accountability, and transparency of the community.* **Are you in support of the Housing First approach and Guiding Principle described above?** *

- (●) Yes
- ( ) No

11. **Please identify the level of commitment you can provide to the Council on Homelessness by selecting one of the options below:** *

- (●) I can be available for **2 or more meetings per month**, including the standing monthly COH meeting the first Thursday of every month from 1pm to 3pm.
- ( ) I can be available **only for the standing monthly COH meeting** the first Thursday of every month from 1pm to 3pm.
- ( ) I am **not available** for the standing monthly COH meeting, **but can make other meetings 2 or more times** per month.
- ( ) I am **not available** for the standing monthly COH meeting and **may not be able to make other meetings** more than once per month.

12. **Which of the following geographic areas do you spend the most time in?** *

- ( ) Far East Contra Costa County (for example: Discovery Bay, Bethel Island)
- ( ) East Contra Costa County (for example: Bay Point, Pittsburg, Antioch, Brentwood)
- (●) Central Contra Costa County (for example: Martinez, Pleasant Hill, Concord, Walnut Creek)
- ( ) South Contra Costa County (for example: Alamo, Danville, San Ramon)
- ( ) West Contra Costa County (for example: El Cerrito, San Pablo, Richmond, Pinole, Hercules, Rodeo)
- ( ) I spend an equal amount of time in all five geographic areas listed above.

Demographic Information (Optional)

The Council aims to engage as broad a representation as possible of abilities, ages, sexual and gender identities, immigration statuses, and racial, ethnic, and cultural backgrounds, and geographical representation within the County. Responses to the following questions are optional and will be considered in aggregate to ensure that we have recruited a diverse pool of applicants. The Nominating Panel will not review applicants' responses to the following questions.

13. **What are your pronouns (*for example: she/him/they/ze, etc.*)?**

[redacted]

14. **What is your gender identity (*for example: female/male/transgender/non-binary/gender non-conforming, etc.*)?**

[redacted]

15. **What is your sexual orientation (*for example: bisexual/straight/gay/pansexual, etc*)?**

[redacted]

16. **What best describes your age? (Check one)**

[redacted]

- Transition aged youth (18-24)
- Adult (25-61)
- Older adult (62+)

17. **What best describes your race/ethnicity? (Pick as many as apply)**

- [redacted]African American/Black
- Arab/Middle Eastern
- Asian
- Caucasian/White
- East Indian/South Asian
- Latine/a/o/x
- Mixed Race
- Native American
- Pacific Islander
- South/Central American
- Choose not to answer
- Other

18. **Is there any other information you would like to share, including anything that would help us understand how you would contribute to the diverse representation of people and experiences on the Council (for example: lived experience of homelessness, abilities, immigration status, ethnic background, or cultural background)?**

Have lived experience of homelessness. I lived in my car. I'm waiting for my 501c3 to start an organization to help the homeless.

Contact Information

19. Name *

Steve Gallion

20. Email *

[redacted]

21. Phone Number

Application Form

Profile

Steve
First Name

Middle Initial

Gallion
Last Name

[redacted]
Home Address

Suite or Apt

Pleasant Hill
City

CA
State

[redacted]
Postal Code

[redacted]
Primary Phone

[redacted]
Email Address

District Locator Tool

Resident of Supervisorial District:

None Selected

Employer

Job Title

Length of Employment

Do you work in Contra Costa County?

○ Yes ○ No

If Yes, in which District do you work?

How long have you lived or worked in Contra Costa County?

Are you a veteran of the U.S. Armed Forces?

○ Yes ◉ No

Board and Interest

Which Boards would you like to apply for?

Contra Costa Council on Homelessness: Submitted

Seat Name

Lived Experience Advisor

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?

Education

Select the option that applies to your high school education *

☑ None of the above

College/ University A

Name of College Attended

Degree Type / Course of Study / Major

Degree Awarded?

○ Yes ○ No

College/ University B

Name of College Attended

Degree Type / Course of Study / Major

Degree Awarded?

○ Yes ○ No

College/ University C

Name of College Attended

Degree Type / Course of Study / Major

Degree Awarded?

○ Yes ○ No

Other Trainings & Occupational Licenses

Other Training A

Certificate Awarded for Training?

○ Yes ○ 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, commitee, or commission.

See supplemental

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

See supplemental

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:

List any volunteer or community experience, including any advisory boards on which you have served.

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)

○ 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:

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

Important Information

Steve Gallion

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.

Steve Gallion