

Print Form



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

Sean Home Address - Street		
Home Address - Street	R	nt
	City	State Postal Code
	Suisun	CA 94585
Primary Phone (best number to rea	ch you) Email Address	
Resident of Supervisorial District (if	out of County, please enter N/A): N/A	District Locator Tool
Do you work in Contra Costa County	? Ves No If Yes, in which Dis	trict do you work?
Current Employer	Job Title	Length of Employment
District Administator	District Administator	20 years
low long have you lived or worked		
Board, Committee, or Commission Youth Committee	Seat N	lame
Touri Committee		
Have you ever attended a meeting of Pease check one:	Yes No If Yes, how n	
Pease check one: [DUCATION Check appropriate box if you posses	Yes No If Yes, how n	nany?
Pease check one: [DUCATION] Check appropriate box if you posses [] High School Diploma	Yes ✓ No If Yes, how n	nany?
Pease check one: [DUCATION] [Check appropriate box if you posses [] High School Diploma	Yes No If Yes, how n	e G.E.D. Certificate lajor Degree Awarded
Pease check one: DUCATION Check appropriate box if you posses High School Diploma Colleges or Universities Attended University of North Carolina	Yes No If Yes, how no sone of the following: CA High School Proficiency Certificat Degree Type/ Course of Study/No BAS	e G.E.D. Certificate lajor Degree Awarded V Yes No
Pease check one: DUCATION Check appropriate box if you posses High School Diploma Colleges or Universities Attended	Yes No If Yes, how no some of the following: CA High School Proficiency Certificat Degree Type/Course of Study/N	e G.E.D. Certificate lajor Degree Awarded V Yes No V Yes No
Pease check one: DUCATION Check appropriate box if you posses High School Diploma Colleges or Universities Attended University of North Carolina	Yes No If Yes, how no sone of the following: CA High School Proficiency Certificat Degree Type/ Course of Study/No BAS	e G.E.D. Certificate lajor Degree Awarded V Yes No
Pease check one: DUCATION Check appropriate box if you posses High School Diploma Colleges or Universities Attended University of North Carolina San Diego State University	Yes No If Yes, how no sone of the following: CA High School Proficiency Certificat Degree Type/ Course of Study/No BAS	e G.E.D. Certificate lajor Degree Awarded V Yes No V Yes No
EDUCATION Check appropriate box if you posses High School Diploma Colleges or Universities Attended University of North Carolina	Yes No If Yes, how no sone of the following: CA High School Proficiency Certificat Degree Type/ Course of Study/No BAS	e G.E.D. Certificate lajor Degree Awarded V Yes No V Yes No
Pease check one: DUCATION Check appropriate box if you posses High School Diploma Colleges or Universities Attended University of North Carolina San Diego State University	Yes No If Yes, how no sone of the following: CA High School Proficiency Certificat Degree Type/ Course of Study/No BAS	e G.E.D. Certificate lajor Degree Awarded V Yes No V Yes No Yes No

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Please exp	lain why you would like to serve on this particular board, committee, or commission.
believe t through lives at a	ermined to make a difference in the lives of individuals with disabilities. I especially hat reaching out to youth as they transition into becoming adults and guiding them the transition will make them more successful adults. It is critical that we impact their a young age so that they have the tools they need to live indpendently, succeed in their onal careers, and advocate for themselves.
Describe y	our qualifications for this appointment. (NOTE: you may also include a copy of your resume).
Manager	orked for the DOR as a counselor supporting individuals with disabilities, a Team for a team that provides direct Vocational Rehabilitation services. I have been serving ontra Costa County board for over 7 years.
am includ	ling my resume with this application:
Ple	ase check one: ✓ Yes No
re you curr	ently or have you ever been appointed to a Contra Costa County advisory board?
	se check one: Yes V No
If Yes	s, please list the Contra Costa County advisory board(s) on which you are currently serving:
If Ye	s, please also list the Contra Costa County advisory board(s) on which you have previously served:
st any volu	inteer and community experience, including any boards on which you have served.
iscense F	Partnership Agreement (LPA)
	ley Committee
outh Con	nmittee
	a familial relationship with a member of the Board of Supervisors? (Please refer to the relationships the "Important Information" section on page 3 of this application or Resolution No. 2021/234).
Pleas	se check one: Yes No
If Ye	s, please identify the nature of the relationship:
you have	any financial relationships with the county, such as grants, contracts, or other economic relationships
	se check one: Yes No s, please identify the nature of the relationship:

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knowledge and belief, and are made in good faith. I acknowledge and unders	
application is publicly accessible. I understand and agree that misstatements	
cause forfeiture of my rights to serve on a board, committee, or commission	in Contra Costa County.
Signed:	Date:

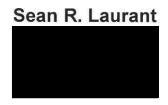
I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my

Submit this application to: ClerkofTheBoard@cob.cccounty.us OR Clerk of the Board 1025 Escobar Street, 1st Floor Martinez, CA 94553

Questions about this application? Contact the Clerk of the Board at (925) 655-2000 or by email at 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 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.



OBJECTIVE

Obtain a District Administrator position within the Department of Rehabilitation

SUMMARY OF QUALIFICATIONS

- Demonstrated understanding and sensitivity of the issues around the employment of individuals with disabilities
- Experience managing a program providing VR services to individuals with disabilities utilizing knowledge of current state and federal laws and regulations governing the public VR program
- Demonstrated ability to mentor and develop staff, recognizing and making good use of an individual employee's strengths and familiarity with Personnel-related State Civil Service laws, rules, procedures and resources
- Seamlessly communicate effectively with all levels of staff, remain flexible with constantly changing priorities, and use tact and good judgment
- Broad-minded management skills, with an emphasis on establishing goals and objectives, resource management, fostering accountability and achieving measurable and timely results by identifying, inspiring and encouraging innovative approaches
- Possess strong organizational skills and commitment to quality customer service
- Excellent attendance and dependability with ability to travel within the district and to Sacramento
- Successful and progressive experience in Disability Employment Counseling and Mental Health Awareness
- Progressive leadership experience in crisis intervention and mental health solutions
- Streamlined coordination with community agencies regarding program policies, procedures, and client needs
- Successfully implemented the California Mentally III Offender Crime Reduction Grant

PROFESSIONAL EXPERIENCE

Staff Service Manager I
State of California, Department of Rehabilitation, Concord, CA
2016 – Present

Manage VR Counselors on day-to-day operations, including specialized caseloads. Cultivate a positive and motivating work environment, recognizing and making good use of each employee's individual strengths. Apply knowledge of Personnel-related laws, rules, procedures and resources. Communicate effectively with all levels of staff. Remain flexible when priorities shift using use tact and good judgment. Productively conduct multiple program services, departmental initiatives and workgroups. Provide community and program resources to the public. Ensure essential quality and reliability in all phases of counseling and services provided by my team.

Senior Vocational Rehabilitation Counselor, Qualified Rehabilitation Professional State of California, Department of Rehabilitation, Fairfield, CA 2004 - 2016

Managed over 200 consumer cases providing career development and employment growth. Oversaw mental health contract to ensure the collaboration between DOR, County Mental Health and Community Resource Programs provided employment services to consumers in maintaining successful outcomes within the mental health co-op contract. Interviewed applicants to determine appropriate services needed to ensure suitable and successful job outcomes. Effectively built and maintained positive rapport with clients, management and community agencies. Utilized knowledge of fundamental principles, behavior intervention and human development. Established and maintained co-facilitated therapeutic relationships with clients. Created and implemented behavioral programs with clients for employment support. Worked with individuals at risk of homelessness and/or psychiatric hospitalization. Provided daily crisis support intervention in prevention of consumer's decomposition due to substance abuse and mental illnesses. Worked and maintained on call field work status for crisis and emergency calls. Developed and maintained daily progress reports, reviewed and implemented treatment and service plans as needed. Monitored, evaluated and assisted in performance of consumer obtaining goals and objectives. Identified client needs and established priorities and resources for employment development and growth.

EDUCATION

Master's Degree - Vocational Rehabilitation San Diego State University- 2008

Bachelor of Science – Computer Science/Math University of North Carolina- 1993

Certifications and Certificates of Completion

First Aid/CPR – Mental Health First Aid Protective Intervention Training - Suicide and Violence Assessment Introduction to Rehabilitation Counseling - Rehabilitation Technology Employment Plan Development - Case Assessment and Documentation

Computer and Software Skills

AWARE and FBI/NCIC Database Microsoft Office Suite, Unix, FoxPro, Fortran, D-Base Health and Welfare Data Systems

References available upon request