

Date Received:

Accepted Rejected

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

MAIL OR DELIVER TO: Contra Costa County CLERK OF THE BOARD 651 Pine Street, Rm. 106 Martinez, California 94553-1292

| T EXACT NAME OF BOARD, COMMITTEE, OR COMMISSION | | Contra Costa Commissi M FW Women PRINT EXACT SEAT NAME (If applicable) | | | | |
|---|----------------------------|--|-----------------------|------------|--------------------|---------------------------|
| . Name: Brown (Last Name) | M (€ (First N | helle Name) | | Ca | いしいい Middle Nan | ne) |
| Address: (No.) | (Street) (/ | A (au | MO City) | CA (State) | 9451 | |
| 3. Phones: (Home No.) | (Work No.) | | l No.) | | | |
| · · | | (55) | , | | | |
| EDUCATION: Check approp | | | _ | ificate 🔲 | | |
| EDUCATION: Check approp h School Diploma G.E.D e Highest Grade or Education | . Certificate California H | | _ | | Degree Type | |
| EDUCATION: Check approp h School Diploma G.E.D e Highest Grade or Education Names of colleges / universities | . Certificate | Degree Awarded | iciency Cert | | | Degree Awarde |
| ADM | Course of Study / Major | Degree Awarded | iciency Cert Units Co | mpleted | Туре | Date Degree Awarded |
| EDUCATION: Check appropriate School Diploma G. G.E.D Highest Grade or Education Names of colleges / universities attended | Course of Study / Major | Degree Awarded | Units Co | Quarter | Туре | Degree Awarde |

Medical Exercise Specialist

6. PLEASE FILL OUT THE FOLLOWING SECTION COMPLETELY. List experience that relates to the qualifications needed to serve on the local appointive body. Begin with your most recent experience. A resume or other supporting documentation may be attached but it may not be used as a substitute for completing this section.

| A) Dates (Month, Day, Year) | Title | Duties Performed |
|---|---|--|
| From To | (60/puner | Program |
| 2010 present | Employer's Name and Address | 1 00 |
| Total: Yrs. Mos. | suf | Manage/HR |
| 4 10 | | traning coaches |
| Hrs. per week 40 ^x . Volunteer □ | | personal+group |
| B) Dates (Month, Day, Year) | Title | Duties Performed |
| From To | Communications Drtr. | student/fcacher |
| 2009 2012 | Employer's Name and Address | communications |
| Total: Yrs. Mos. | East West langfu | |
| 3 4 | 140c Alamo Plona | training manual development |
| Hrs. per week 464 . Volunteer | Mamo CA | ducionat |
| | 94507 | |
| C) Dates (Month, Day, Year) | Title | Duties Performed |
| From To | Head Designer | Designed eco- |
| 4/2001 8/2008 | Employer's Name and Address | friendly |
| | | ıı · · · · · · · · · · · · · · · · · · |
| Total: <u>Yrs.</u> <u>Mos.</u> | me Dursuit of Hamony | fashion line, |
| Total: Yrs. Mos. | ᅦ | fashion line, managed produ |
| | meansuit of Hamony Sada Morica CA | fashion line, managed produ sales |
| Hrs. per week 40+ . Volunteer | Sarta Morica CA | managed produ |
| 1 5 | ᅦ | managed productions of the second sec |
| Hrs. per week 40+ Volunteer D D) Dates (Month, Day, Year) From To | Sasta Morica CA Title COO ouner | Duties Performed Designed clothing line |
| Hrs. per week 40+ Volunteer D) Dates (Month, Day, Year) | Sarta Morica CA Title COO OUNEV Employer's Name and Address | Duties Performed Designed clothing line |
| Hrs. per week 40+ Volunteer D) Dates (Month, Day, Year) From To 3 2000 4 2007 | Sasta Morica CA Title COO ouner | Duties Performed Designed clothing |

| 7. How did you learn about this vacancy? |
|--|
| ☑CCC Homepage Walk-In Newspaper Advertisement District Supervisor Other |
| 8. Do you have a Familial or Financial Relationship with a member of the Board of Supervisors? (Please see Board Resolution no. 2011/55, attached): No Yes |
| 9. Do you have any financial relationships with the County such as grants, contracts, or other economic relations? No K Yes |
| If Yes, please identify the nature of the relationship: |
| 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 understand that all information in this application is publically accessible. I understand and agree that misstatements / omissions of material fact may cause forfeiture of my rights to serv on a Board, Committee, or Commission in Contra Costa County. Sign Name: Date: |

- **Important Information**
- 1. This application is a public document and is subject to the California Public Records Act (CA Gov. Code §6250-6270).
- 2. Send the completed paper application to the Office of the Clerk of the Board at: 651 Pine Street, Room 106, Martinez, CA 94553.
- 3. A résumé or other relevant information may be submitted with this application.
- 4. All members are required to take the following training: 1) The Brown Act, 2) The Better Government Ordinance, and 3) Ethics Training.
- 5. Members of 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.
- 6. Advisory body meetings may be held in various locations and some locations may not be accessible by public transportation.
- 7. Meeting dates and times are subject to change and may occur up to two days per month.
- 8. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.