APPLICATION FOR APPOINTMENT TO SACRAMENTO COUNTY
BOARDS, COMMISSIONS AND COMMITTEES

http://www.sccob.saccounty.net/pages/boards.html

ORIGINAL APPLICATIONS MUST BE FILED WITH
THE CLERK OF THE BOARD OF SUPERVISORS
700 H STREET, SUITE 2450, SACRAMENTO, CA 95814
FAXED AND E-MAILED APPLICATIONS WILL NOT BE ACCEPTED FOR FILING

Application For:

Name of Board, Commission or Committee

Seat Category/Type

Mr. / Mrs. / Ms.

Last Name

First

MI

Home Address:

Street Address

City

Zip Code

Mailing Address:

Street Address

City

Zip Code

Sacto. County Supervisorial District in which you reside:

Incumbent? Y / N

(This information is available from http://www.supervisorlookup.saccounty.net/)

Do you live in an Incorporated City? Y / N

If so, which City?

Phone Numbers:

Home

Work

Cell

Fax

E-mail Address(es):

Employment History:

Please list your employment history for the last ten years beginning with your most recent job, explaining any gap(s) in employment. Please continue on a separate piece of paper if necessary.

<table>
<thead>
<tr>
<th>From/To</th>
<th>Name and Address of Employer</th>
<th>Position/Duties</th>
<th>Reason for Leaving</th>
</tr>
</thead>
<tbody>
<tr>
<td>From:</td>
<td>To:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>From/To</td>
<td>Name and Address of Employer</td>
<td>Position/Duties</td>
<td>Reason for Leaving</td>
</tr>
<tr>
<td>From:</td>
<td>To:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>From/To</td>
<td>Name and Address of Employer</td>
<td>Position/Duties</td>
<td>Reason for Leaving</td>
</tr>
<tr>
<td>From:</td>
<td>To:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Office Use Only

Seat #/Replaces

Appointment Expiration Date

Term Expiration Date

rev. 12/3/15
EDUCATION - Please check all applicable boxes if you possess one of the following:

- High School Diploma
- G. E. D.
- CA High School Proficiency Certificate

<table>
<thead>
<tr>
<th>Name(s) of College/University</th>
<th>Units Earned</th>
<th>Course of Study/Major</th>
<th>Degree Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Have you ever been convicted of a felony?  Yes ☐  No ☐

Community experience and affiliations: __________________________________________
________________________________________
________________________________________
________________________________________

Other County Boards/Commissions/Committees on which you have served: __________________________
________________________________________
________________________________________
________________________________________

Other experience you feel would be helpful to the Board of Supervisors in making this appointment: _________________
________________________________________
________________________________________
________________________________________

Do you or any member of your immediate family work for the County of Sacramento or hold a position that might conflict with your duties for this Board/Commission?  If yes, please explain:
________________________________________
________________________________________
________________________________________

REFERENCES:  Please list three references with telephone numbers

________________________________________  __________________________________
________________________________________  __________________________________
________________________________________  __________________________________

IF YOU ARE APPOINTED AND REQUIRED TO COMPLETE A STATEMENT OF ECONOMIC INTERESTS (FORM 700), YOU MUST FILE THE FORM WITH THE CLERK OF THE BOARD PRIOR TO TAKING ANY ACTION AS A MEMBER OF THIS BOARD.

Date

Original signature required

ORIGINAL APPLICATIONS MUST BE FILED WITH THE CLERK OF THE BOARD OF SUPERVISORS
700 H STREET, SUITE 2450, SACRAMENTO, CA 95814
COPIES, FAXES AND EMAILS WILL NOT BE ACCEPTED FOR FILING

rev. 12/3/15