MIMI DUZENSKI
Clerk of the Board

BOARD OF SUPERVISORS

44 N. SAN JOAQUIN STREET, SUITE 627
STOCKTON, CALIFORNIA 95202
TELEPHONE: 209/468-3113
FAX: 209/468-3694

BOB ELLIOTT
Chairman
Fifth District

CARLOS VILLAPUDUA
Vice Chairman
First District

FRANK L. RUHSTALLER
Second District

STEVE J. BESTOLARIDES
Third District

KEN VOGEL
Fourth District

SAN JOAQUIN COUNTY
APPLICATION FOR APPOINTMENT
TO BOARDS/COMMISSIONS/COMMITTEES

NAME _____

BOARD/COMMISSION/COMMITTEE _____

SUPERVISORIAL DISTRICT
(If unknown, contact Clerk of the Board) _____

CATEGORY *Please check one:*
Incumbent ☐ New Appointment ☐

RESIDENCE ADDRESS City/St/Zip _____

RESIDENCE PHONE _____

MAILING ADDRESS _____

OCCUPATION _____

EMAIL _____

BUSINESS ADDRESS _____

FAX _____

BUSINESS PHONE _____

Briefly state how you learned of the opening: _____

Briefly state your experience which you feel would be helpful should you serve on this Board/Commission/Committee: _____

Professional Experience: _____

Professional and/or other community organizations on which you serve: _____

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

Education: _____

_____

Personal Interests & Hobbies: _____

_____

_____

Are you an employee or officer of the County, any City in the County, the State, or the Federal government?
Yes ☐ No ☐

Are you related by blood or marriage to any employee or officer of an agency which is subject to the Board, Committee or Commission to which you are seeking appointment?
Yes ☐ No ☐

Are there any facts of which you are aware that would cause you to have an actual or apparent conflict of interest with respect to the position to which you are seeking appointment?
Yes ☐ No ☐

If "Yes", you will be asked to submit the facts in writing for review before your consideration of appointment.

Have you ever been convicted of a felony which would disqualify you from appointment?
Yes ☐ No ☐

If you answer "Yes", please list the nature of the conviction and the date and court in which the conviction was entered. _____

_____

- If you are appointed, you may be required to be bonded for your performance. If you are appointed and cannot be bonded as required, your appointment will be revoked.
- If you desire a personal interview or wish to address the Board of Supervisors, you may contact the Board Office directly at (209) 468-3113.
- If you desire to provide additional information, please attach it to this application.

_____ _____

SIGNATURE **DATE**

Please return application to: **Clerk of the Board**
44 N. San Joaquin Street, Suite 627
Stockton, CA 95202

If you have any questions, please feel free to call the Clerk of the Board Office at (209) 468-2350.