



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

KATHERINE M. MILLER
Chair
Second District

STEVE J. BESTOLARIDES
Vice Chair
Third District

CARLOS VILLAPUDUA
First District

KEN VOGEL
Fourth District

BOB ELLIOTT
Fifth 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: _____

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. _____

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- 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.