APPLICATION FOR APPOINTMENT TO CALAVERAS COUNTY BOARDS AND COMMISSIONS

NAME (please print)	SUPERVISORIAL DISTRICT (reference: www.co.calaveras.ca.us)
MAILING ADDRESS	RESIDENCE ADDRESS
RESIDENCE TELEPHONE NUMBER	
BUSINESS TELEPHONE NUMBER	EMAIL ADDRESS

NAME OF BOARD OR COMMISSION FOR WHICH APPLICATION IS BEING MADE:

Prevent Child Abuse Council Calaveras

Prevent Child Abuse Council Welfare & Institutions Code 130140 Designated Representation (please check one)

❒ Representative of Calaveras Works & Human Services Agency Children's Services	❒ Representative of Calaveras County Public Health Department	❒ Representative of Calaveras County Probation Department	❒ Representative of Calaveras County Licensing Agencies

❒ Representative of Calaveras County Criminal Justice System including: ❒ Sheriff Department ❒ District Attorney's Office ❒ Superior Court ❒ Coroner's Office	❒ Representative of Prevention & Treatment Service Community including: ❒ Medical and Mental Health Services ❒ Community Based Social Services ❒ Public & Private Schools	❒ Community Representatives including: ❒ Community volunteers ❒ Civic Organizations ❒ Religious Community Representatives

Please state briefly your previous experience/background which you feel will be of benefit to your serving on this specific Board or Commission:

State briefly your reason for wanting to serve on this Board or Commission:

Other information you would like to submit:

Date: Signature:_____

PLEASE RETURN TO:

Calaveras County Board of Supervisors
County Clerk's Office
891 Mountain Ranch Road
San Andreas, CA 95249
Phone: 209-754-6370, FAX: 754-6733

or,

Prevent Child Abuse Council Calaveras
c/o First 5 Calaveras
16 B North Main Street
PO Box 209, San Andreas, CA 95249
Phone: 209-754-1470, FAX: 754-1425