

APPLICATION FOR  
COUNTY OF EL DORADO  
BOARD, COMMISSION, OR COMMITTEE

Return to: Clerk of the Board of Supervisors  
County Government Center  
330 Fair Lane, Placerville, CA 95667  
e-mail: edc.cob@edcgov.us

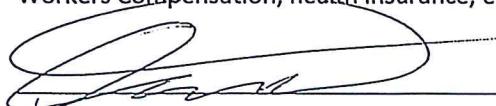
DATE RECEIVED

Copy to Supervisor - District \_\_\_\_\_

INSTRUCTIONS: Please complete each item below. Be sure to enter the title of the Board, Commission, or Committee (only one per application please) for which you desire consideration. For more complete information or assistance contact the Clerk of the Board of Supervisors' Office. This application shall be maintained for a period of one year only. After one year it is necessary to file a new application for another year of eligibility. Please print in ink or type.

1. Board/Commission Applying for: <u>District 4 Veterans Commission</u>	2. Today's Date: <u>1/13/16</u>
3. Name: <u>Williams Amanda Gayle</u>	4. E-Mail Address: <u>amanda@mtndem.org</u>
5. Address: <u>Placerville</u>	6. Telephone: <u>530-623-1234</u>
Number <u>100</u>	Street <u>Placerville</u>
City <u>Placerville</u>	Zip Code <u>95667</u>
7. Occupation>Title: <u>Writer</u>	Employer: <u>Mountain Democrat</u>
8. List all County board, commissions or committees of which you are now or have been a member. Indicate dates of service. <u>None.</u>	
9. Summary of qualifications related to group(s) listed above. (What experience or special knowledge do you bring to your area of interest?) <u>Navy Veteran, Honorable discharge as a third class petty officer.</u>	
10. Affiliations with professional and/or community groups: <u>Women of El Dorado, several others through my work with the Mountain Democrat.</u>	
11. Why do you seek appointment? <u>Bringing a new voice to the VC to envoke change, implement Veteran's housing, preference for local jobs, VA rights advocate, etc.</u>	
12. Additional Information: Give any information explaining your qualifications, experience, training, education, volunteer activities, community organization memberships, or personal interests that bear on your application for above Board, Commission, or Committee. Attach additional sheets as necessary.	
13. Indicate Supervisor who will receive a copy of this application: <u>Mike Ranalli, District 1U</u>	

Appointees to Boards, Commissions or Committees are not considered to be County employees for purposes of benefits, such as Workers Compensation, health insurance, etc.



Signature of Applicant



1/13/16  
Date