




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

Clerk of the Board of Supervisors
330 Fair Lane, Placerville, CA 95667
(530) 621-5390 | edc.cob@edcgov.us

Board or Commission Applying For In Home Support Services Advisory Committee (Community Member)		Vacant Position or Title Community Member	
First Name Brian		Last Name Lordson	
		Residential City El Dorado Hills, CA	Residential ZIP Code 95762
Daytime Telephone		Mobile Telephone (no value entered)	
Occupation/Title Risk Engineer		Employer AXA XL Insurance	
List all County boards, commissions or committees to which you are/were appointed. Please include dates of service. N/A			
Summary of qualifications I was born with a genetic health, although I am not currently disabled in the state. I was a certified EMT in the state of CA for 6 years working on an ambulance and in the hospital. Additionally, my Father has worked in case management for disabled and developmentally delayed my entire life which has had a positive impact on me.			
Affiliations with professional and/or community groups Chair of the Sacramento Chapters "Tomorrow's Leaders" of the Cystic Fibrosis Foundation which is a young professional development group linked to the Cystic Fibrosis Foundation.			
Why do you seek appointment? I see appointment because I have great interest in serving the community and this community in particular.			
Additional Information We just closed on a house in El Dorado Hills in early May and are new residents to El Dorado County. With this, I began to look into the government structure in EDH and the county overall. I wanted to see if there was an opportunity to serve the community and of the vacancies listed on the county website this seemed like the best fit. I've served as a Volunteer Firefighter in San Diego County previously, currently the Chair of the Tomorrows Leaders of the Sacramento Chapter Cystic Fibrosis Center, and have great interest in this position and future opportunities to serve my community in any level of an appointed or elected position.			
If known, indicate the member of the Board of Supervisors who will receive a copy of this application Unknown			
File Attachments Head Shot.jpg			
Signature of Applicant 		Date 05/23/2019	

Submitted: Thu May 23 2019 08:21:00 GMT-0700 (Pacific Daylight Time)

ID: 9