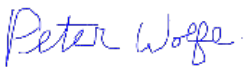




# APPLICATION FOR COUNTY OF EL DORADO BOARD OF SUPERVISORS BOARD, COMMISSION, OR COMMITTEE

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

Board or Commission Applying For <b>Veterans Affairs Commission</b>		Vacant Position or Title <b>District III Alternate</b>	
First Name <b>Peter</b>		Last Name <b>Wolfe</b>	
		Residential City <b>Placerville</b>	Residential ZIP Code <b>95667</b>
Daytime Telephone		Mobile Telephone	
Occupation/Title <b>Architect, Semi-Retired</b>		Employer <b>Self</b>	
List all County boards, commissions or committees to which you are/were appointed. Please include dates of service. <b>1. Former EDC Building Inspector II, 2001-2005</b>			
Summary of qualifications <b>1. Retired Lieutenant-Commander, U.S. Coast Guard. 22 years enlisted and commissioned officer service. Numerous operational shore, afloat, and aviation assignments. Commanding Officer, Patrol Boat Unit, San Diego. Executive Officer, Coast Guard Air Station, Sacramento. Numerous unit and personal awards. 2. Former member and Chair, City of Placerville Planning Commission, 2015-2018 3. Architect for El Dorado County Veterans Monument 4. Architect for Cameron Park Branch, El Dorado County Library 5. 32-years experience as a licensed Architect 6. 7-years experience teaching architecture drawing and history courses for Cosumnes River College, Main Campus</b>			
Affiliations with professional and/or community groups <b>1. Past President, Kiwanis Club of Placerville 2. Past President, El Dorado County Search and Rescue 3. Co-founder and current Artistic Director of Imagination Theater, Placerville 4. Former member, American Institute of Architects</b>			
Why do you seek appointment? <b>1. Assist the Board of Supervisors in promoting, aiding and encouraging public support for veterans and reviewing policies and programs affecting veterans.</b>			
Additional Information <b>I am fortunate to have strong verbal and visual communication skills.</b>			
If known, indicate the member of the Board of Supervisors who will receive a copy of this application <b>Supervisor Thomas</b>			
File Attachments <b>(no attachments added)</b>			
Signature of Applicant* 		Date <b>12/07/2021</b>	

\* You consent and agree that you are signing this document electronically. You further agree that your electronic signature is as valid as if you manually signed the document in writing.  
12/07/2021 04:09:03, ID: 221, URL: <https://www.edcgov.us/Government/BOS/CommissionsAndCommittees/Pages/Application-Form.aspx>