

**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: <i>EDC Mental Health - West Slope</i>	2. Today's Date: <i>6-4-17</i>
3. Name: <i>Allan, Shawn M</i> Last First Middle	<i>lyon.com</i>
Number Street <i>Camino CA 95709</i> City Zip Code	6. Telephone: Home _____ Business _____
7. Occupation/Title: <i>Realtor/Broker</i>	Employer: <i>Lyon Real Estate</i>
8. List all County board, commissions or committees of which you are now or have been a member. Indicate dates of service. <i>none</i>	
9. Summary of qualifications related to group(s) listed above. (What experience or special knowledge do you bring to your area of interest?) <i>I have a 15yo daughter utilizing Mental Health Services in Placerville.</i>	
10. Affiliations with professional and/or community groups: <i>none at this time</i>	
11. Why do you seek appointment? <i>Having a daughter with a severe mental illness, and utilizing services, I see it's flaws and would love to be a part of change and helping others obtain services.</i>	
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. <i>I was a foster child myself, a case manager for CASA, as well as a CASA for several kids. I was also a foster and adoptive parent.</i>	
13. Indicate Supervisor who will receive a copy of this application: ?	

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

*Allan*

**SIGN HERE**

*6-4-17*

Signature of Applicant

Date

REVISED 1/6/2011 11:55 AM

You can save this completed application and attached to an email and send to edc.cob@edcgov.us

**Clear Form**   **Spell Check**   **Save**   **Print**