

**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

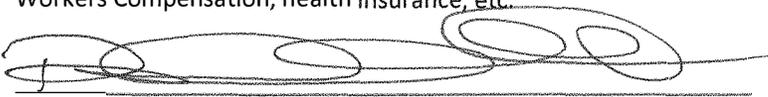
**DATE RECEIVED**

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>Child Abuse Prevention Council</i>	2. Today's Date: <i>5.16.2019</i>
3. Name: <i>GROTKE RITA M</i> Last First Middle	4. E-Mail Address:
5. Address: <i>Placerville 95667</i> City Zip Code	6. Telephone: Home _____ Business _____
7. Occupation/Title: <i>DA Investigator / Child Advocacy Center Coordinator</i>	Employer: <i>EL DO CO. DA</i>
8. List all County board, commissions or committees of which you are now or have been a member. Indicate dates of service. <i>Deputy Sheriff's Association Nevada County</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>5 years child abuse ; sexual assault investigation; 14 yrs. Law enforcement; child forensic interviewer; child advocacy center coordinator for El Dorado County (current)</i>	
10. Affiliations with professional and/or community groups: <i>El Dorado County Deputy Sheriff's Association; DA office; child advocacy center coordinator</i>	
11. Why do you seek appointment? <i>Community involvement; more connected to issues facing child protection and safety in the area I serve.</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.	
13. Indicate Supervisor who will receive a copy of this application: <i>Jenna Knight</i>	

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

*5.16.2019*  
Date