

EL DORADO COUNTY

APPLICATION FOR APPOINTMENT TO COUNTY
COMMISSIONS, COMMITTEES, OR ADVISORY BOARDS

This form is used for consideration of appointments made by the County Board of Supervisors. Please complete both pages of this form and attach a resume if available. Return completed form to the Director of Mental Health, 344 Placerville Drive, Suite 20, Placerville, CA 95667.

1. Date: Dec 8, 2009
2. Committee, Commission, Board or principle area of interest:
Mental Health Commission
3. Application by LORI Shepherd Resident of Supervisor District 1
4. List all county boards, commissions or committees of which you are now or have been a member. Indicate dates of service.

NONE

5. Summary of Qualifications related to group(s) listed above. (What experience or special knowledge do you bring to your area of interest?)

I have received BOTH Public + Private MH Services For The PAST 24 YRS. I Grew UP With a Mother who also had a Psych Disability I have an M.A. Degree in PSYCHIATRIC REHABILITATION From Boston University I Developed and Implemented A STATEWIDE Peer/SELF-ADVOCACY Program For People with Psych. Disabilities I have been a Consultant TO SEVERAL COUNTRIES TO help clients develop Self-help Groups

6. Affiliations with professional and/or community groups:

I have been a member of The California Network of Mental Health Clients for 24 YRS

7. Why do you seek appointment?

I would like to USE my knowledge & experience in
Mental Health Issues to provide a client perspective
on the Commission.

8. Applicant's name: LORI Shepherd

9. Occupation & Title: Collaborative Projects Director

Employer: DISABILITY RIGHTS CALIFORNIA

10. Other remarks:

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

Lori Shepherd

Signature

12/8/09

Date