

**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

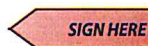
Copy to Supervisor - District _____

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: Child Abuse Prevention Council	2. Today's Date: 01/30/2017
3. Name: Klein Patrick M Last First Middle	4. E-Mail Address: _____
5. Address: _____ _____ City Zip Code	6. _____ Business _____
7. Occupation/Title: Development Director	Employer: El Dorado Community Health Center (EDCHC)
8. List all County board, commissions or committees of which you are now or have been a member. Indicate dates of service. N/A	
9. Summary of qualifications related to group(s) listed above. (What experience or special knowledge do you bring to your area of interest?) I have been a Project Manager for the last twenty years. As the Assistant Director of Health Center Operations for the California Primary Care Association I was a member of the Emergency Preparedness Council and Joint Action Committee with the State Public Health Department. At EDCHC I served as the Clinic Director and now as the Development Director.	
10. Affiliations with professional and/or community groups: Certified Healthcare Emergency Professional (CHEP), various emergency preparedness certifications in the Incident Management System (ICS) and with the Department of Homeland Security. I have worked closely with emergency planning professionals at the county and state level in preparedness activities targeting the protection of children.	
11. Why do you seek appointment? I believe I can contribute to the community and protection of children that need our help. I am involved in providing safety net services in El Dorado County and I know there is more that can be accomplished. I already work with many partners within the community that could help to further the efforts to reduce child abuse and hope to enhance my efforts.	
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. Former foster parent of special needs boys, ages 3 and 6. Long term supporter of volunteer activities involving children, Foster kids, Women in Crisis, Sex Trafficking, and the Special Olympics.	
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.

Patrick Klein



01/30/2017

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