




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

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|---|--|---|--------------------------------------|
| Board or Commission Applying For DIAMOND SPRINGS AND EL DORADO COMMUNITY ADVISORY COMMITTEE | | Vacant Position or Title Committee Member | |
| First Name DD | | Last Name Klein | |
| | | Residential City Shingle Springs | Residential ZIP Code 95682 |
| Daytime Telephone | | Mobile Telephone | |
| Occupation/Title Development Director, El Dorado Community Health Centers | | Employer El Dorado Community Health Centers | |
| List all County boards, commissions or committees to which you are/were appointed. Please include dates of service. Child Abuse Prevention Council | | | |
| Summary of qualifications I have 20+ years of experience in project management and business operations. My formal education includes a BS in Social Psychology and a MS in Human Resource Management. I also have a variety of certifications in Emergency Management, Emergency Preparedness and Information Technology. I have been involved in business growth and community development in support of safety net populations across California for the last 10 years. | | | |
| Affiliations with professional and/or community groups El Dorado Community Health Centers Central Valley Health Network California Primary Care Association | | | |
| Why do you seek appointment? I am interested in the development occurring in this area. It will directly effect my home life and the professional growth of my health centers. | | | |
| Additional Information It is my goal to support reasonable growth while helping to maintain the rural charm that is El Dorado County. | | | |
| If known, indicate the member of the Board of Supervisors who will receive a copy of this application (no value entered) | | | |
| File Attachments (no attachments added) | | | |
| Signature of Applicant*  | | Date 06/10/2020 | |

* 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.
06/10/2020 09:19:38, ID: 92, URL: <https://www.edcgov.us/Government/BOS/CommissionsAndCommittees/Pages/Application-Form.aspx>