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

 ${f D}$ 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.

period of one year o	Tily. After one year it is necessary to me a ne	w application for another year of eligibility. Please print in link or type.
1 Board/Commission Applying for:		2 Today's Date:
Tahoe Resource Conservation District		07/22/2021
3. Name:		4. E-Mail Address:
McIntyre, Kathleen Bridget		
Last	First Midd	Pi -
5. Address:		6 Telephone:
South Lake Tahoe	96150	Home
7. Occupation/Title:	Zip Code	Employer:
Forest Health Program Manager		Tahoe Regional Planning Agency
8 List all County board, commissions or committees of which you are now or have been a member. Indicate dates of sen		
None at this time.	minissions of committees of which	you are now of have been a member. Indicate dates a service.
None at this time.		
9. Summary of qualification	ns related to group(s) listed above.	(What experience or special knowledge do you bring to your area of
interest?)		
See above.		
10. Affiliations with professional and/or community groups:		
Former member of Society of American Foresters, current appointed representative on the Collaborative Forest Landscape Restoration Program Federal Advisory Committee.		
Landscape Restoration Pro	ogram Federal Advisory Committ	ee.
44 Miles de servicione la conseila		
11. Why do you seek appointment? See attached document with responses for questions 11 and 12.		
See attached document wit	in responses for questions in an	u 12.
12 Additional Information:	Give any information explaining you	ur qualifications, experience, training, education, volunteer activities,
community organization memberships, or personal interests that bear on your application for above Board, Commission, or		
	tional sheets as necessary.	
See attached document with responses for questions 11 and 12.		
13. Indicate Supervisor who Sue Novasel	will receive a copy of this application	on:
		sidered to be County employees for purposes of benefits, such as
Workers Compensation, hea	·	
Kath lee n M (Inty re	Digitally signed by Kathleen McIntyre n r A ou = EIP t: : ; ; a r .: , ,	
	Date:2021.07.2210:52:19-07'00'	
Signature of Applicant		Date

REVISED 1/6/201111:55 AM

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