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

desire consideration. I	For more complete information or assistar	nce contact the Clerk of the B	mission, or Committee (only one per application please) for which you oard of Supervisors' Office. This application shall be maintained for a or another year of eligibility. Please print in ink or type.
1. Board/Commission Applying for:			2. Today's Date:
El Dorado Solid Waste Advisory Committee			06/03/2014
3. Name:			4. E-Mail Address:
Loewen	Kəvin	Anthony	kloewen@edhcsd.org
Last	First	Middle	
5. Address:			6. Telephone:
1021 Harvard Way			
	reet		Home
El Dorado Hills 95762			
City		Zip Code	Business
7. Occupation/Title:			Employer:
Director of Parks a			El Dorado Hills CSD
8. List all County board, commissions or committees of which you are now or have been a member. Indicate dates of service.			
Kings County, CA 2007-2014; Fish and Game Advisory Committee; Museum Advisory Committee			
9. Summary of qualifications related to group(s) listed above. (What experience or special knowledge do you bring to your area of interest?)			
Served as Liaison to the Committees: prepared/processed agendas, minutes, and other materials; prepared and presented Committee reports to the Board of Supervisors			
10. Affiliations with professional and/or community groups:			
Applied Behavior Analysis International; California Applied Behavior Analysis; National Recreation and Parks Association; California Parks and Recreation Society; Kiwanis Club			
11. Why do you seek appointment?			
To represent El Dorado Hills on this important advisory committee to the Board of Supervisors			
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 recessary.			
13. Indicate Supervisor who will receive a copy of this application: Ron Mikulaco			
Appointees to Boards, Commissions or Committees are not considered to be County employees for purposes of benefits, such as			
Workers Compensation, health insurance, etc.			

REVISED 1/6/2011 11:55 AM

Kevin Anthony Loewen

Signature of Applicant

Clear Form Spell Check

Date

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

SIGN HERE

154-0790 A

06/03/2014

1 of Frint