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

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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.

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Board/Commission Applying for:	2. Today's Date:							
Early Care and Planning Council	05/12/2014							
3. Name:	4. E-Mail Address:							
Birks Nina Jean								
Last First Middle								
5. Address:	6. Telephone:							
Number Street	Home							
City Zip Code	Business							
7. Occupation/Title:	Employer:							
Employment Services Supervisor - Welfare-to-Work Program	EDC Health & Human Services Agency							
8. List all County board, commissions or committees of which you are now or have been a member. Indicate dates of service.								
None.								
9. Summary of qualifications related to group(s) listed above. (What experience or special knowledge do you bring to your area of interest?)								
As a supervisor for Employment Services, I approve and process S	tage One child care through El Dorado County							
Welfare-to-Work Program.	tage one child care through Li Borado county							
vollare-te-vvolk i fogram.								
10. Affiliations with professional and/or community groups:								
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CalWORKs Policy Committee								
C.W.D.A Valley Mountain Regional, Welfare-to-Work								
44 144 1								
11. Why do you seek appointment?								
To network and keep El Dorado County Welfare-to-Work program updated with community resources and changes.								
	8							
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.								
I have over 9 years experience in both CalWORKs eligibility and the Welfare-to-Work Program. I am also a coordinator of								
the Linkages Program that provides co-case management for clients with open CPS and CalWORKs cases.								
13. Indicate Supervisor who will receive a copy of this application:								
Machelle Rae - Program Manager								
Appointees to Boards, Commissions or Committees are not considered to be County employees for purposes of benefits, such as								
Workers Compensation, health insurance, etc.								
Mary Barde								
NIVIU/ 13PPUL	5/12/2014.							
	1							
Signature of Applicant	Date							
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Clear Form

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

Spell Check

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