

**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.

<b>1. Board/Commission Applying for:</b> Veteran Affairs Commission	<b>2. Today's Date:</b> 04/02/2015
<b>3. Name:</b> Scrivani                      William (Bill)              James <div style="display: flex; justify-content: space-between; font-size: small;"><div>Last</div><div>First</div><div>Middle</div></div>	<b>4. E-Mail Address:</b> _____
<b>5. Address:</b> <div style="display: flex; justify-content: space-between; font-size: small;"><div>Number      Street</div><div>Placerville                      95667</div></div> <div style="display: flex; justify-content: space-between; font-size: small;"><div>City</div><div>Zip Code</div></div>	<b>6. Telephone:</b> <div style="display: flex; justify-content: space-between; font-size: small;"><div>Home</div><div>/</div></div> <div style="display: flex; justify-content: space-between; font-size: small;"><div>Business</div><div></div></div>
<b>7. Occupation/Title:</b> Retired USAF E-9	<b>Employer:</b> DOD
<b>8. List all County board, commissions or committees of which you are now or have been a member. Indicate dates of service.</b> None	
<b>9. Summary of qualifications related to group(s) listed above. (What experience or special knowledge do you bring to your area of interest?)</b> 1. 30 years of Active Duty 2. A veteran for 22 years 3. Ability to work well with others 4. Capable of objective decision making	
<b>10. Affiliations with professional and/or community groups:</b> Life-time member of Disabled American Veterans (DAV)	
<b>11. Why do you seek appointment?</b> To assist the the "BOS" and the "County Veteran Community"	
<b>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.</b> 1. Co-Founder of the Placerville Natural Food Cooperative 2. Yoga Instructor qualified to conduct classes for Veterans with PTSD	
<b>13. Indicate Supervisor who will receive a copy of this application:</b> Supervisor Michael Ranalli	

Appointees to Boards, Commissions or Committees are not considered to be County employees for purposes of benefits, such as Workers Compensation, health insurance, etc.

William J. Scrivani



Signature of Applicant

SIGN HERE

04/02/2015

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

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