

**APPLICATION FOR APPOINTMENT TO BOARDS OR COMMISSIONS
APPOINTED BY THE MARIN COUNTY BOARD OF SUPERVISORS**

Name _____ Email _____

Home Address _____

Street

_____ Telephone: _____

Town

Zip

Employer's Name _____ Telephone: _____
& Address _____

Present Occupation _____ Are You Over 18 Years of Age _____

Position applied for: **HOUSING AUTHORITY BOARD OF COMMISSIONERS**

As representative of (check one) Tenant of Marin Housing Authority _____

Tenant of Marin Housing Authority AND over 62 years of age _____

(You may attach additional pages for the following questions)

Summary of Qualifications for Position: _____

Reasons for Applying: _____

Please describe how you would help support excellence in public service and help the County effectively respond to the needs of the diverse residents we serve: _____

Please describe your experience in engaging with members of all races, people from a wide variety of ethnic and socio-economic backgrounds and people with disabilities: _____

List any organizations of which you are an officer or an employee which are funded by or provide services to county government: _____

Date _____ Signature _____

Please return to: Clerk, Marin County Board of Supervisors
Marin County Civic Center, Suite 329
San Rafael, CA 94903
415-473-7331(T) 415-473-3645(F)
commissions@marincounty.org

Marin County is an Equal Opportunity Employer and Volunteer Center. Minorities, women and individuals with disabilities are strongly encouraged to apply.

****Please note you may be required to file a Conflict of Interest disclosure form if appointed****