



APPLICATION FOR BOARD MEMBERSHIP

Return this application to:
Sutter County Community Action Agency
950 Tharp Road, Suite 1303, Yuba City, CA 95993
Or email to jslade@ysedc.org
For more information, contact Jackie Slade at
(530) 751-8555

NAME _____

MAILING ADDRESS _____

RESIDENCE ADDRESS _____ SUPERVISORIAL DISTRICT _____

HOME TELEPHONE _____ BUSINESS TELEPHONE _____ CELL _____

EMAIL _____

OCCUPATION/PROFESSION/EMPLOYER _____

Which sector of the community do you wish to represent?
 Public Sector-Board of Supervisor Representative Must be a Sutter County Board of Supervisor or their appointee, a Sutter County resident and will serve the length of term of the Supervisor.
 Private Sector Must be a Member of an Organization or Business, in Sutter County and/or be a resident of Sutter County and will serve a 4-year term.
 Low Income representatives of the poor Must either be living in poverty or be from an organization that represents low-income groups, a Sutter County resident and will serve a 4-year term.

REASONS FOR WISHING TO SERVE ON THIS BOARD _____

QUALIFICATIONS FOR SERVING ON THIS BOARD (if applying as a low income rep, make sure to indicate your qualifications to represent the low income, see above) _____

LIST ANY PUBLIC POSITIONS CURRENTLY HELD _____

LIST OTHER BOARDS/COMMITTEES/COMMISSIONS ON WHICH YOU CURRENTLY SERVE, OR HAVE PREVIOUSLY SERVED _____

I HEREBY DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____

DATE _____