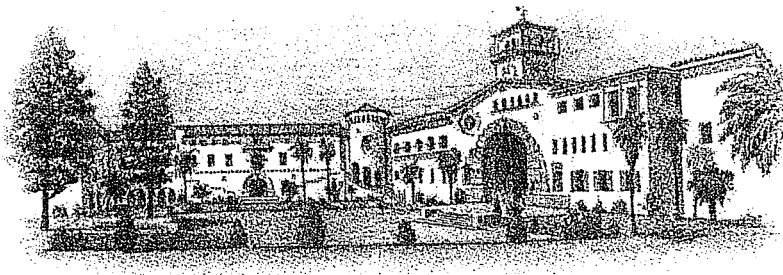


DOREEN FARR
Third District Supervisor



OFFICE OF THE
THIRD DISTRICT SUPERVISOR
County Administration Building
105 East Anapamu Street
Santa Barbara, California 93101
Telephone: (805) 568-2191
Fax: (805) 568-2883
www.countyofsb.org

COUNTY OF SANTA BARBARA

Date: April 27, 2011

Clerk of the Board of Supervisors
County of Santa Barbara
105 East Anapamu Street
Santa Barbara CA 93101

For placement on the agenda for the meeting of: **May 10, 2011**

I would like to recommend the following for appointment / **reappointment** to the
Human Services Commission

Name of Appointee: **Julie Kessler Solomon**
Address: **275 Elderberry Drive**
City/State/Zip: **Goleta CA 93117**
Home Telephone: **805-683-3722**
Work Telephone:
Cell Phone: **805-403-6020**
E-mail: **Juliekessler@earthlink.net**

Appointee will represent **Third District** on this committee.

Position was formerly held by:
Term expires: **June 30, 2014**

Check only if this appointment is filling an unexpired vacancy.

Third District Supervisor Doreen Farr

Signed By: Stephanie Langsdorf for DF

Clerk of the Board: Please send minute order to Nancy Madsen, Public Health x4078.

| APPLICATION FOR COUNTY OF SANTA BARBARA BOARD, COMMISSION, OR COMMITTEE | | DATE RECEIVED |
|---|-------------------------------|--|
| Return to: Clerk, Board of Supervisors County Administration Building 105 E. Anapamu Street, Room 407 Santa Barbara, CA 93101 | | <input type="checkbox"/> Copy to Supervisor |
| 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, 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. | | |
| 1. APPLYING FOR: (Use specific title) <i>Human Services Commission</i> | | 2. Today's Date: <i>6/5/09</i> |
| 3. NAME: <i>Kessler Solomon Jane</i> <small>Last First Middle</small> | | 4. E-MAIL ADDRESS: <i>@earthlink.net juliekessler</i> |
| 6. ADDRESS: <i>275 Elderberry Drive</i> <small>Number Street</small> <i>Goleta 93117</i> <small>City Zip Code</small> | | 5. TELEPHONE: Home: <i>805-683-3727</i> Cell: <i>805-403-6020</i> Business: <i>805-403-6020</i> |
| 7. References: Give names and addresses of three persons, not relatives, who have knowledge of your character, experience, community involvement, and abilities. | | |
| <small>NAME</small> | <small>ADDRESS</small> | <small>TELEPHONE NUMBER</small> |
| <small>OCCUPATION</small> | | |
| A. <i>George Raltes</i> | <i>478 Verdez Ave. Goleta</i> | <i>215-9579</i> |
| B. <i>Rabbi Steve Cohen</i> | <i>1000 San Antonio Green</i> | <i>764-7869</i> |
| C. | | |
| 8. Are you or have you been employed by the County of Santa Barbara? <input type="checkbox"/> YES <input checked="" type="checkbox"/> No If YES, list: Department: _____ Title: _____ Date: _____ | | |
| 9. Please check appropriate boxes (optional): Ethnic or racial identity: <input checked="" type="checkbox"/> White <input type="checkbox"/> Black (African American) <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Native American/Alaskan Native <input type="checkbox"/> Other (Please specify) | | 10. Education completed: <i>Bs in Business, CSUN plus some law school</i> 11. Indicate Supervisor who will receive a copy of this application: <i>Doreen Farr</i> |
| 12. EXPERIENCE: Please explain why you are interested in serving and what experience you bring to the Commission or Committee for which you are applying. <i>please see attached</i> | | |
| 13. 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>please see attached</i> | | |
| 14. SIGNATURE OF APPLICANT <i>x Jane A. Kessler Solomon</i> | | |