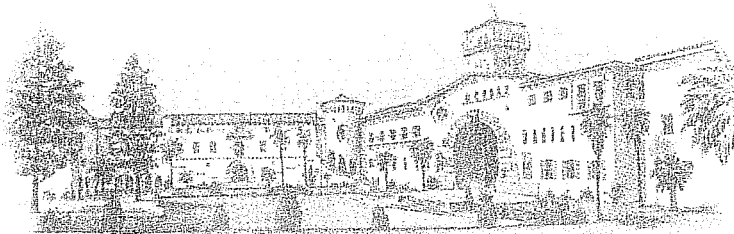


JANET WOLF
County Supervisor, Second District

MARY E. O'GORMAN
Chief of Staff

JANE S. FERRY
Office Manager

HILARY R. CAMPBELL
Board Administrative Assistant



BOARD OF SUPERVISORS
105 East Anapamu Street, 4th Floor
Santa Barbara, California 93101

TELEPHONE: (805) 568-2191
FAX: (805) 568-2283
E-mail: jwolf@sbcbos2.org
www.countyofsb.org/bos/wolf

SANTA BARBARA COUNTY

Date: **September 8, 2010**

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

2010 SEP -8 AM 9:10
COUNTY OF SANTA BARBARA
CLERK OF THE
BOARD OF SUPERVISORS

For placement on the agenda for the meeting of: **September 21, 2010**

Re: **Advisory Board on Alcohol and Drug Problems**

I would like to recommend the following for the **appointment** to subject Committee, Commission or Board:

Full Name of Appointee: **Lesley Jane Masuda**

Address: **31 A North San Marcos Rd.** E-mail: **otterklub2@aol.com**

City: **Santa Barbara** State: **CA** Zip: **93111** Salutation: **Ms.**

Telephone: **(805) 696-6519**

Appointee will represent Second District on this commission.

Position was formerly held by: **Kristine Pilkington**

Appointment Expires on: **1/3/2012**

Second District Supervisor Janet Wolf

Signed By: *Janet Wolf*

Clerk of the Board: Please send minute order to:

- 1) John Doyel, Interim Program Manager, ADP
- 2) Lesley Masuda, See address above.
- 3) Jane Ferry, Second District Office

RECEIVED

APPLICATION FOR COUNTY OF SANTA BARBARA BOARD, COMMISSION, OR COMMITTEE

DATE RECEIVED AUG 26 2010

2010 AUG 26 AM 11:39

2ND DISTRICT OFFICE

COPY TO SUPERVISOR CLERK OF THE BOARD OF SUPERVISORS

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.

1. APPLYING FOR: (Use specific title) ADVISORY BOARD ON ALCOHOL AND DRUG PROBLEMS

2. Today's Date: 8-24-10

3. NAME: MASUDIA LESLEY JANE

4. E-MAIL ADDRESS: otterklob2@aol.com

6. ADDRESS: 31 A NORTH SAN MARCOS RD SANTA BARBARA CA 93111

5. TELEPHONE: Home: (805) 696 6519 Business: newly unemployed

7. References: Give names and addresses of three persons, not relatives, who have knowledge of your character, experience, community involvement, and abilities.

Table with 4 columns: NAME, ADDRESS, TELEPHONE NUMBER, OCCUPATION. Rows include BARBARIA FLYNN, KATHY FERNANDEZ, and HERMANO QUIROZ.

8. Are you or have you been employed by the County of Santa Barbara? YES [X] No [] If YES, list Department: CLERK OF BOARD Title: CLERICAL Date: 1983

9. Please check appropriate boxes (optional): Ethnic or racial identity: [X] White [] Black (African American) [] Hispanic [] Asian/Pacific Islander [] Native American/Alaskan Native [] Other (Please specify)

10. Education completed: MA CLINICAL PSYCHOLOGY BA SOCIAL SCIENCE

11. Indicate Supervisor who will receive a copy of this application: JANET WOLF

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. THIS SUBJECT IS OF PROFESSIONAL INTEREST TO ME - I AM IN RECOVERY. I HAVE BEEN A SUBSTANCE ABUSE COUNSELOR IN SB PART-TIME FROM 2001-2007. I AM ESPECIALLY INTERESTED IN PROGRAMMING AND STRATEGIC PLANNING AND RELAPSE PREVENTION.

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. 1. Experienced in writing Relapse prevention Curriculum for group use. 2. Have worked extensively with drug felons, the mentally ill addict/alcoholic, unwell mothers who are addicts and the homeless. 3. I am also a professional Journalist - Business writer published locally - a former Editor & news Reporter.

14. SIGNATURE OF APPLICANT