SALUD CARBAJAL First District Supervisor

JEREMY TITTLE Chief of Staff

ERIC FRIEDMAN
District Representative

LISA VALENCIA SHERRATT

District Representative



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

TELEPHONE: (805) 568-2186 FAX: (805) 568-2534 www.countyofsb.org/bos/carbajal E-mail: Scarbajal@sbcbos1.org

COUNTY OF SANTA BARBARA

Date: February 22, 2016	FEB 23 PM NTY OF SANIA DARD OF SIPER	
Clerk of the Board of Supervisors County of Santa Barbara 105 East Anapamu Street Santa Barbara, CA 93101	4: 19 RAPEATTA	
RE: Committee, Commission or Board District Appoints	ment	
For placement on the Board of Supervisors agenda for the 2016	ne meeting of: March 8,	
I would like to recommend the \(\sum \) appointment/ \(\sum \) reappointment of the following person to the: Montecito Board of Architectural Review		
Salutation: Full Name of Appointee: Address: City/State/Zip: Home Phone: Work Phone: E-mail:	_Ms.	
Appointee will represent the First District on this commit Position was formerly held by: Derrik Eichelberger Check box only if this appointment is filling an unexp		
First District Supervisor: Salud Carbajal	00011 " 11 "	
Signed by:	COB Information Verification Letter of Resignation on file	
	☐ Vacancy Notice on file	
	Term:	

yearsBeginning date ___Ending date ___

APPLICATION FOR

COUNTY OF SANTA BARBARA BOARD,

COMMISSION, OR COMMITTEE
Return to: Clerk, Board of Supervisors
County Administration Building
105 E. Anapamu Street, Room 407
Santa Barbara, CA 93101

2015 DEC 14 PATEIREZEIVED

COUNTY OF SANTA BARBARA CLERK OF THE SOARD OF SUPERVISORS

☐ 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.	, and an approximation and an approximation and an approximation and approximation a	
1. APPLYING FOR: (Use specific title)	2. Today's Date:	
MONTERITO BOARD OF ARCHTERS	URAL (EVIEW 14DEC-2015	
3. NAME:	4. E-MAIL ADDRESS:	
KUPIEC ROBERT A		
Last First Mi	iddle - 1 · · · · ·	
6. ADDRESS:	5. TELEPHONE:	
	Llame.	
Number Street	Home:	
	Rusinoses	
City	Zip Code Business:	
7. References: Give names and addresses of three persons, not relatives, who have knowledge of your character, experience, commutational control of the community is a control of the cont		
ay involvement, and abilities.		
NAME ADDRESS	TELEPHONE NUMBER OCCUPATION	
A. NAWCY LETFERT F	HI PROSIDONT	
	HEOSIDONT BRIZZER	
B. LARRY FEINBERG .	DRICTOR	
C. Persian Eighersongen,	CHAIR	
8. Are you or have you been employed by the County of Santa Barbara? No If YES, list:		
Department:	Title: Date:	
9. Please check appropriate boxes (optional):	10. Education completed:	
Ethnic or racial identity: Sex: White Male Black (African American) Female		
		☐ Hispanic
☐ Asian/Pacific Islander ☐ Native American/Alaskan Native		
☐ Other (Please specify)	SAWD CALBALAL	
12. EXPERIENCE: Please explain why you are interested in serving a which you are applying.	and what experience you bring to the Commission or Committee for	
Apolitor . 45 Years		
MONTECTO POSIDONT SINCU 2003		
I NTEROSTED IN MAINTAINING COUNTY OF AREST PESIGN		
INTERESTED IN MAINTAINING COUNTRY OF PIECES (ICSIGN)		
IN MY DOMMUNITY		
 ADDITIONAL INFORMATION: Give any information explaining yo community organization memberships, or personal interests that bear Attach additional sheets as necessary. 	ur qualifications, experience, training, education, volunteer activities, on your application for above Board, Commission, or Committee.	
BOARD OF TRUSTEES ANTIOCH UNI	VERSITY	
" " MONTECITO ASSOCIATION		
" kloblectio	MUDUIAIION	
Tara Cuara Manusa lucara	TEOR LOCATION	
FORMER CHAIR-NATIONAL INSTITUTE FOR PROJECTS IN PUBLIC		
11 11 VANI ALEN INSTITUTE FOR FROJECTS IN TUBLIC		
	14-111121020	
14 CICNATURE OF ARRIVANT		
14. SIGNATURE OF APPLICANT		