

<b>APPLICATION FOR COUNTY OF SANTA BARBARA BOARD, COMMISSION, OR COMMITTEE</b> Return to: Clerk, Board of Supervisors County Administration Building 105 E. Anapamu Street, Room 407 Santa Barbara, CA 93101	DATE RECEIVED  <b>2007 MAR -9 11:11:22</b>  <input type="checkbox"/> Copy to Supervisor COUNTY OF SANTA BARBARA
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**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) <b>FIRE APPEALS BOARD</b>	2. Today's Date: <b>2.28.07</b>
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3. NAME: <b>OAKS, DON WILLIAM</b> <small>Last First Middle</small>	4. E-MAIL ADDRESS: <b>DONOAKS@SYV.COM</b>
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6. ADDRESS: <b>2650 LATIGO DRIVE</b> <small>Number Street</small> <b>SOLVANG, 93463</b> <small>City Zip Code</small>	5. TELEPHONE: Home: <b>805-688-5969</b> Business: <b>805-680-1818</b>
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7. References: Give names and addresses of three persons, not relatives, who have knowledge of your character, experience, community involvement, and abilities.

NAME	ADDRESS	TELEPHONE NUMBER	OCCUPATION
A. ROBERT KALLMAN	1671 SHORELINE DR. SANTA BARBARA	965-6659	RETIRED
B. MIKE STOKER	431 VALLEY DAIRY RD BUELLTON	686-4300	ATTORNEY
C. JOHN SCHERREI	4410 CATHEDRAL OAKS SANTA BARBARA	681-5507	FIRE CHIEF

8. Are you or have you been employed by the County of Santa Barbara?  YES  No IF YES, list  
 Department: **FIRE** Title: **FIRE MARSHAL** Date: **1975-2001**

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)	Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
10. Education completed: <b>B.A. IN POLITICAL SCIENCE</b> <b>J.D. IN LAW</b>	
11. Indicate Supervisor who will receive a copy of this application: <b>FIRESTONE,</b> <b>GRAY, &amp; CENTENO</b>	

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. **FOUR DECADES IN PUBLIC FIRE SERVICE WITH MOST OF THAT TIME SPENT IN FIRE CODES, STANDARDS, AND REGULATIONS. I CONTINUE TO HAVE A PASSION FOR THE PROCESS AND I HAVE STAYED CURRENT BY ACTIVITIES IN CODE DEVELOPMENT AND INTERPRETATION ON BEHALF OF THE CALIFORNIA STATE FIRE MARSHAL AND THE CALIFORNIA FIRECHIEFS ASSOC**

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.  
  
**SEE ATTACHED**

14. SIGNATURE OF APPLICANT  
 x **Don Oaks**