APPLICATION FOR COUNTY OF SANTA BARBARA BOARD, COMMISSION OR COMMITTEE

Return to: Clerk of the Board of Supervisors 105 E. Anapamu Street, Room 407 Santa Barbara, CA 93101

14. SIGNATURE OF APPLICANT:

DATE RE	CEIVED
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 $\hfill\Box$ Copy to Supervisor

Instructions:	Please	complete	each	section	below.	Вe	sure	to ente	r the	title	of	the	Board,	Commis	sion o	r Commit	tee (on	lv one	per
application) f	or whic	:h you desi	ire co	nsiderati	on in Bo	ox 1	. For	more c	omple	ete in	forn	natio	n or as	ssistance	. conta	ct the Cle	rk of th	e Boai	rd of
Supervisors. F	iease p	rint in ink	or typ	e. Please	note th	nat A	ALL in	formati	on pr	ovide	d is	a ma	tter of	public re	ecord, a	and is subj	ect to d	isclosu	ıre.

1. APPLYING FOR: (Use Specific Title Behavioral Wellness Commission	2. TODAY'S	2. TODAY'S DATE:						
benavioral weilness commission	4/1/19	1/1/19						
3. NAME:		4/1/19 4. E-MAIL ADDRESS:						
Olivarez	Marcos	James	Y. E MAIL	100NL33.				
Last	First	Middle						
6. ADDRESS:			5. TELEPHO	ONE:				
P.L			Home					
Number		Street						
City		Zip Code	Business:					
7. REFERENCES: Give names and	addresses of three (3) indi-		hous knowledge of					
involvement, and abilities.	addresses of times (5) man	viduais (flot relatives) who	nave knowledge of your	character, experience, community				
NAME		ADDRESS	TELEPHONE	OCCUPATION				
			TEEL HONE	Neighborhood Organizer				
Sharon Byrn	ie			rveighborhood Organizer				
Alan Bleecke	er			Owner, Capitol Hardware				
				o mon, capito, maraware				
				Homeless Advocate				
Nancy MacCra								
8. Are you, or have you ever been,	employed by the County of Sa	inta Barbara?	X	No ☐ Yes - if yes, list below				
Department:	Title:		Date:	***************************************				
9. PLEASE CHECK APPROPRIATE BOX	XES (OPTIONAL):	10. EDUCATIO	N COMPLETED:					
Ethnic or Racial Identity:	Sex:	ļ.						
□ White	X Male	1						
X African American	□ Fem	ale						
□ Hispanic		11. INDICATE S	SUPERVISOR WHO WILL RE	ECEIVE A COPY OF APPLICATION:				
☐ Asian/Pacific Islander		Gregg Hart						
□ Native American/Alaskan Native								
□ Other (please specify):								
12. EXPERIENCE: Please explain wh	y you are interested in servin	g, and what experience you	bring to the Committee.	Attach additional documentation as				
necessary. I was chronically homele	ss here in Santa Barbara until	the Milpas Outreach Project	t moved me indoors. I wor	rked on that team helping get other				
homeless to find housing. I have sta	iyed in the Salvation Army, th	e CADA Detox Center, PATH	, CARES, and used emerge	ncy mental health resources from a				
hospital that is in Pasadena, under	contract with the county. I ur	nderstand all of these are pa	aid for by the county, so t	hat makes me a consumer of Santa				
Barbara County Behavioral Wellnes	ss services. I believe I can br	ring some diversity to that	board as an openly gay i	male that has been homeless, and				
experienced addiction and mental ill	ness.							
13. ADDITIONAL INFORMATION: Given	e any information explaining	qualifications evnerience tr	ning education valuates	v activities community and incline				
memberships, or personal interests t	hat bear on your application f	or the above Board, Commiss	sion or Committee. Attach	additional sheets as necessary.				
I served on the Milpas Outreach Proj	ect team to get homeless indi	ividuals connected with servi	ces and moved indoors. I k	mow a lot about the county and city				
logiams that keep people homeless.	i also started Pushy Shovels ga	ardening project to help thos	e with addictions and men	ital illnesses connect with the earth,				
and by growing plants, learn how to	grow themseives into wellness	5.						
		янального при						