## 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 19, 2012

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 1, 2012

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

Name of Appointee: Sylvia Uribe

Address:

218 Entrance Road #6

City/State/Zip:

Goleta, CA 93117

Home Telephone:

805-717-5013

Work Telephone:

805-568-2318

Cell Phone:

E-mail:

transilpro@gmail.com

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

Position was formerly held by: vacant

Term expires: June 30, 2015

X Check only if this appointment is filling an unexpired vacancy.

Third District Supervisor Doreen Fan

Clerk of the Board: Please send minute order to Sharon Friedrichsen and Susan Foley in Housing/Community Development Department 805-568-3520.

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# APPLICATION FOR

### COUNTY OF SANTA BARBARA BOARD, COMMISSION, OR COMMITTEE

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

DATE RECEIVED

□ 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 lnk or type.

year of eligibility. Please print in link or type.	
1. APPLYING FOR: (Use specific title)  HUMAN Services Commission 4/12/12	
3. NAME: 4. E-MAIL ADDRESS:	
District Silvia transil pro egmai). co	
6. ADDRESS: 5. TELEPHONE:	и.
218 Entrance Rd. #6 Home: 805-717-5013	
60/e/a Ca. 9317 Business: 805-568-2318	
7. References: Give names and addresses of three persons, not relatives, who have knowledge of your character, experience, community involvement, and ablities.	
NAME ADDRESS TELEPHONE NUMBER OCCUPATION	
^Elsa Covanados 943-6832 SBREC Exec. T	livectur
B-Jarrad Schwartz 966-2063 Just Community	es Exec Dir
= 204 ce Dudley 568-2300 District alto	
8. Are you or have you been employed by the County of Santa Barbara? LYES No If YES, list:	•
Department: District attorney's Ofice Title: VW advoodate: 7005 to pr	sent
9. Please check appropriate boxes (optional):  Ethnic or racial identity:  Sex:	
ECWhile □ Male □ Black (African American) ■ Female	
Asian/Pacific Islander  11. Indicate Supervisor who will receive a copy of this application:	
□ Native American/Alaskan Native □ Other (Please specify)  □ Oveen Taw	
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.	<b>40</b>
Since 1993 I've been working w/ Non-profits in d aspacities. I'm very active in the community	illeven t
appacities. I'm very active in the commonity	ナナル
wo we ar unburstaing the peeds in 513 pounty.	
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've worked on all sides of the Human Services &	ield.
as a volunteer, staff member, consultant & co	ntvactor.
-I presently serve in two Non-profit zagicus. Sal	Llamente
- I've worked wi Budgets, paired to needs	
Tolitical Committee & Lasino Demo cratic Caucus - I ve worked wi Budgets paired to needs - I ve cerved in the Cooleta Human Services Conni For years I've worked for the most vulnerable i'n	ttec
tor years the worked for the most unlinerable in	IUV
14. SIGNATURE OF APPLICANT	LAMMUNITY.
XXXXXXX	