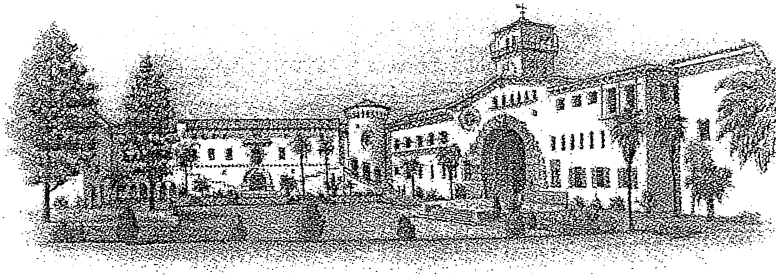


DOREEN FARR  
Third District Supervisor



OFFICE OF THE  
THIRD DISTRICT SUPERVISOR  
County Administration Building  
105 East Anapamu Street  
Santa Barbara, California 93101  
Telephone: (805) 568-2192  
Fax: (805) 568-2883  
www.countyofsb.org

COUNTY OF SANTA BARBARA

Date: 2/25/16

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

RE: Committee, Commission or Board District Appointment

For placement on the Board of Supervisors agenda for the meeting of: 3/8/16

I would like to recommend the appointment of the following person to the Los Alamos Cemetery Board

Salutation: Mr.  
Full Name of Appointee: Peter Kopcrak  
Address:  
City/State/Zip: )  
Home Phone:  
Work Phone:  
E-mail:

Appointee will represent the Third District on this commission.  
Position was formerly held by: George Shaw

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

Third District Supervisor: Doreen Farr

Signed by:

*EW for DF*

COB Information Verification	
<input type="checkbox"/>	Letter of Resignation on file
<input type="checkbox"/>	Vacancy Notice on file
Term:	
<input type="checkbox"/>	_____ years
<input type="checkbox"/>	Beginning date _____
<input type="checkbox"/>	Ending date _____

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

DATE RECEIVED

Copy to Supervisor

Instructions: Please complete each section below. Be sure to enter the title of the Board, Commission or Committee (only one per application) for which you desire consideration in Box 1. For more complete information or assistance, contact the Clerk of the Board of Supervisors. Please print in ink or type. Please note that ALL information provided is a matter of public record, and is subject to disclosure.

1. APPLYING FOR: (Use Specific Title of Board, Commission or Committee)

2. TODAY'S DATE:

12-1-2015

3. NAME:

4. E-MAIL ADDRESS:

KOPCZAK

PETER

PAUL

Last

First

Middle

6. ADDRESS:

5. TELEPHONE:

Number

Home

City

Zip Code

Business:

7. REFERENCES: Give names and addresses of three (3) individuals (not relatives) who have knowledge of your character, experience, community involvement, and abilities.

NAME

ADDRESS

TELEPHONE

OCCUPATION

8. Are you, or have you ever been, employed by the County of Santa Barbara?

No

Yes - if yes, list below

Department:

Title:

Date:

9. PLEASE CHECK APPROPRIATE BOXES (OPTIONAL):

Ethnic or Racial Identity:

- White  
 African American  
 Hispanic

- Asian/Pacific Islander  
 Native American/Alaskan Native  
 Other (please specify):

Sex:

- Male  
 Female

10. EDUCATION COMPLETED:

BACHELOR'S OF SCIENCE  
CONSTRUCTION MANAGEMENT - CAL POLY SLO

11. INDICATE SUPERVISOR WHO WILL RECEIVE A COPY OF APPLICATION:

12. EXPERIENCE: Please explain why you are interested in serving, and what experience you bring to the Committee. Attach additional documentation as necessary.

I RESIDE IN THE TOWN OF LOS ALAMOS. I WOULD LIKE TO HELP MY COMMUNITY BY PROVIDING MY KNOWLEDGE, EXPERIENCE AND TALENTS TO THIS COMMITTEE. I HAVE WORKED WITH MULTIPLE STATE, FEDERAL AND LOCAL MUNICIPALITIES ON A MULTITUDE OF PROJECTS FOR THE PAST 30 YEARS. I HAVE PROVEN ORGANIZATIONAL AND COMMUNICATION SKILLS. I CAN PROVIDE A RESUME UPON REQUEST.

13. ADDITIONAL INFORMATION: Give any information explaining qualifications, experience, training, education, volunteer activities, community organization memberships, or personal interests that bear on your application for the above Board, Commission or Committee. Attach additional sheets as necessary.

CERTIFICATIONS IN OSHA SAFETY PROGRAMS  
30 YEARS MANAGING LARGE PUBLIC WORKS PROJECTS  
AND KNIGHT FOR KNIGHTS OF COLUMBUS - CATHOLIC CHILDREN & CHARITIES.  
MASTER SKILLS - EXCEL, WORD, AUTOCAD, MORE.  
ESTIMATING AND ACCOUNTING EXPERIENCE.

14. SIGNATURE OF APPLICANT:

*[Handwritten Signature]*