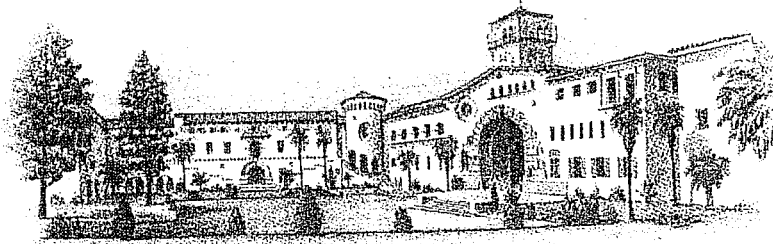


15-0-378 15-0-378

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: May 8, 2013

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 21, 2013**

I would like to recommend the following for the appointment / **reappointment** to the  
**Civil Service Commission**

Name of Appointee: **Sheila Cassidy Federman**  
Address:  
City/State/Zip:  
Home Telephone:  
Work Telephone:  
Cell Phone:  
E-mail:

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

Position was formerly held by:

Term expires: **May 31, 2017**

2013 MAY -8 PM 2:05  
COUNTY OF SANTA BARBARA  
CLERK OF THE  
BOARD OF SUPERVISORS

\_\_\_\_ Check only if this appointment is filling an unexpired vacancy.

Third District Supervisor Doreen Farr

Signed By: Stephanie Langsdorf for DF

**Clerk of the Board:** Please send minute order to Shen Rajan, staff to Civil Service Commission x 2810.

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

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 ink or type.

1. APPLYING FOR: ( Use specific title)

CIVIL SERVICE COMMISSIONER

2. Today's Date:

06-17-2009

3. NAME:

FEDERMAN SHEILA CASSIDY  
Last First Middle

4. E-MAIL ADDRESS:

6. ADDRESS:

Number

Street

City

Zip Code

5. TELEPHONE:

Home:

Business:

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. SEE ATTACHED

B.

C.

8. Are you or have you been employed by the County of Santa Barbara? ☒ YES ☐ No If YES, list:

Department: PUBLIC WORKS

Title: SECRETARY Date: 1986-1988

9. Please check appropriate boxes (optional):

Ethnic or racial identity:

- ☒ White  
☐ Black (African American)  
☐ Hispanic  
☐ Asian/Pacific Islander  
☐ Native American/Alaskan Native  
☐ Other (Please specify)

Sex:

- ☐ Male  
☐ Female

10. Education completed:

PH.D.

11. Indicate Supervisor who will receive a copy of this application:

DOREEN FARR, 3RD DISTRICT

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.

SEE ATTACHED

13. ADDITIONAL INFORMATION: Give any information explaining your qualifications, experience, training, education, volunteer activities