STEVE LAVAGNINO

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COUNTY OF SANTA BARBARA

March 30, 2017

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 April 11, 2017

I would like to appoint the following individual for appointment to the Human Services Commission.

Kathleen Ann Boysen

Appointee will represent the Fifth District on this committee. Position was formerly held by: Alexandra Christine Allen Term expires: December 31, 2019

Fifth District Supervisor Steve Lavagnino

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

| andientian) for which you de | sire consideration in Rox | For more co | mplete informat | ion or ass | istance, co | n or Committee (only one per ntact the Clerk of the Board of d, and is subject to disclosure. | |
|---|---|---------------------------------|-------------------|---------------|-------------------|---|--|
| 1. APPLYING FOR: (Use Specific Title of Board, Commission or Committee) | | | | | 2. TODAY'S DATE: | | |
| HUMAN SERVICES COMMISSION | | | | | MARCH 27,2017 | | |
| 3. NAME: | | | | | 4. E-MAIL AI | DDRESS: | |
| BOYSEN | BOYSEN KATHLEEN | | ANN | | | } | |
| Last | First | Middle . | | | S TO SPHONE. | | |
| 5. ADDRESS: | | | | 5. TELEPHONE: | | | |
| | | | | | Home: <u>d</u> | | |
| Num | Street | | | | | | |
| | | | | | Cell Business: | | |
| City | City Zip Code REFERENCES: Give names and addresses of three (3) individuals (not relatives) who have known in the control of | | | | | sharpeter experience community | |
| REFERENCES: Give names a involvement, and abilities. | nd addresses of three (3) in | ndividuals (not i | elatives) who hav | e knowled | ge of your | character, experience, community | |
| NAME | | ADDRESS T | | TELEF | HONE | OCCUPATION | |
| TOM APKARIAN | / | | | | | CPA | |
| KATHY MEISSNE | | | | 1 | | TAX PREPARER | |
| PAM TERRY | | | | | | RET. TEACHER | |
| 8. Are you, or have you ever been, employed by the County of Santa Barbara? | | | | | | | |
| o. Ale you, or have you ever occ | in cinbioles of the county | | | | | | |
| Department: | | Title: | | | | Date: | |
| 9. PLEASE CHECK APPROPRIATE BOXES (OPTIONAL): 10. EDUCATION COMPLETED: | | | | | | | |
| Ser BA in MATH | | | | THEMAT | TICS+ | 30 UNITS POSTGRAD | |
| | | lale LIFETIME K- | | | TEACH | ING CREDENTIAL | |
| □ African American 🗷 | | male | | | | | |
| Hispanic | | | 11. INDICATE SUP | PERVISOR W | HO WILL RE | CEIVE A COPY OF APPLICATION: | |
| ☐ Asian/Pacific Islander | | STEVE LAVAC | | | | | |
| Native American/Alaskan Nati | | STEVE | .,,,,,,, | •••• | | | |
| Other (please specify): 12. EXPERIENCE: Please explain why you are interested in serving, and what experience you bring to the Committee. Attach additional documentation as | | | | | | | |
| DECESTIVE TO THE REMODE INVOLVED WITH | | | | | | | |
| AFTER RETIRING FROM TEACHING, I FOUND THAT I WANTED TO DELECT LEARNED OUR COMMUNITY. AS PART OF LEADERSHIP SANTA MARIA VALLEY, I LEARNED OUR COMMUNITY. AS PART OF LEADERSHIP SANTA MARIA VALLEY, I LEARNED BETTER | | | | | | | |
| ALIC CAMMILLITY. PO FACT VI TO THE TOTAL TO DEAD IT LEAD UP | | | | | | | |
| AROUT THE MANY NOTICE OF A SANTA BARRAPA COUNTY I | | | | | | | |
| ABOUT THE MANY AGENCIES AND NON PROFITS THAT TRUTY DEPARTS OUNTY, I LIVES. AS CO-CHAIR OF THE WOMEN'S FUND OF N. SANTA BARBARA COUNTY, I LIVES. AS CO-CHAIR OF THE WOMEN'S FUND OF N. SANTA BARBARA COUNTY, I LIVES. AS CO-CHAIR OF THE WOMEN'S FUND MONIES TO DESERVING ASSISTED IN RAISING AND DISTRIBUTING MONIES TO DESERVING | | | | | | | |
| ASSISTED IN KAISING AND TISTED | | | | | | | |
| NON PROFIT AGENCIES, | | | | | | | |
| 13. ADDITIONAL INFORMATION: Give any information explaining qualifications, experience, training, education, volunteer activities, community organization | | | | | | | |
| memberships, or personal interests that hear on your application for the above Board, Commission or Committee. Attach additional sheets as necessary. | | | | | | | |
| | | | | | | | |
| I HAVE VOLUNTEERED FOR THE FOLLOWING COMMUNITY SCHOOL TUTOR AND CLASS ROOM MARIAN MEDICAL CENTER AUXILIARY, ELEMENTARY SCHOOL TUTOR AND CLASS ROOM VOLUNTEER, SANTA MARIA TUVENILE HALL WRITERS WORKSHOP TEACHER, ENCHARISTIC VOLUNTEER, SANTA MARIA I HAVE SERVED ON | | | | | | | |
| VOLUNIEER, SANTA WHILE SANTA MARIA. I HAVE SERVED ON | | | | | | | |
| - CALLAINING BARDER N. SANTA BARBARA COUNTY WOITH COUNTY | | | | | | | |
| ARTS FOUNDATION, I | INITED WAY AND | SANTA I | MARIA LIBR | ARV F | AGNUO | TION. | |
| | | | | | | | |
| 14. SIGNATURE OF APPLICANT: Kathleen a Boysen | | | | | | | |