Peter Adam
Fourth District Supervisor



Fourth District Office

100 E. Locust Ave., Ste. 101
Lompoc, CA 93436
officeofpeteradam@countyofsb.org

COUNTY OF SANTA BARBARA

Date: February 14, 2018

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: February 27, 2018 Orcutt Trails Commission - TERM ENDING 12/31/2020 Salutation: Mr Mrs Ms. Full Name of Appointee: Robert Albrecht Address: City/State/Zip: Home Phone: Work Phone: E-mail: Appointee will represent the Fourth District on this commission. Position was formerly held by: Check box only if this appointment is filling an unexpired vacancy. Fourth District Supervisor: Peter Adam Signed by: COB Information Verification Letter of Resignation on file

□ Vacancy Notice on file

☐ Beginning date _____

□ _____ years

Ending date

Term:

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

application) for which you desire consideration is 8 of 5.
application) for which you desire consideration in D. 4.5.
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
and is subject to disclosure

Supervisors. Please print i	in ink or type. Please note	that ALL infor	mation provided is	a matter o	of nublic record	and is subject to disclosure.	
1. APPLYING FOR: (Use Spec	ific Title of Board, Commission	or Committee)		- matter t			
Orcutt Trails Commis	ssion	· or committee)			2. TODAY'S DATE:		
PORT OF BUILDING PROPERTY OF STREET					1/25/17		
3. NAME:					4. E-MAIL ADDI	DECC.	
Albrecht	Robert	Robert			4. E-WAIL ADDRESS:		
			W				
Last	First		Middle		-		
6. ADDRESS:					5. TELEPHONE:		
					-	-	
N.					Home:		
) N	umber	S	treet				
-					ì		
City					Business:		
7. REFERENCES: Give name	s and addresses of three /	2\ :	Zip Code				
involvement, and abilities.	s and addresses of three (3) individuals (not relatives) who h	nave knowle	edge of your cha	racter, experience, community	
	AME		ADDRESS				
			ADDRESS	TEL	EPHONE	OCCUPATION	
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7	7.79					_	
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8. Are you, or have you ever l	been, employed by the Coun	ty of Santa Barb	ara?		■ No	☐ Yes - if yes, list below	
Donartmont						a res in yes, hat below	
Department:		Title:			Date	e:	
9. PLEASE CHECK APPROPRIA	TE BOXES (OPTIONAL):		10 EDUCATION	COMPLETE	-		
thnic or Racial Identity: Sex:			IO. EDUCATION	10. EDUCATION COMPLETED:			
■ White		Male	3				
□ African American		Female					
□ Hispanic			11. INDICATE SU	JPERVISOR V	WHO WILL RECEIV	E A COPY OF APPLICATION:	
The state of the state of						EX COLL OF AFFEICATION.	
□ Native American/Alaskan Native □ Other (please specify): Supervisor Peter				Peter Ac	lam		
12 EXPERIENCE: Plansa avala	in orbital and a second						
necessary.	in why you are interested in	serving, and w	hat experience you b	ring to the	Committee. Attac	h additional documentation as	
recessary.							
Currently serving sec	ond year on the com	mission as	acting Socrete				
,	one your on the con	iiiissioii as	acting Secreta	ary.			
3. ADDITIONAL INFORMATIO	N: Give any information expl	aining qualificati	ions, experience, trair	ning, educati	ion, volunteer acti	vities, community organization	
nemberships, or personal inte	rests that bear on your applic	ation for the abo	ove Board, Commission	on or Commi	ittee. Attach addit	ional sheets as necessary	
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ast member and Lea	com committee was	arsegold Ci	A), Help with th	e local N	VICA (Nation	al Interschoolasitc	
Joining / 1000 clation) t	cam, committee men	iper and pa	ast President of	f Col Ver	nto Cycling to	eam, and put on	
tate Cycling Champi	onships on VAFB for	r 10 years.				A STATE OF THE PARTY OF THE PAR	
4. SIGNATURE OF APPLICA	NT: 75. ()	for					