
Instructions

You may fill out this application on-line by tabbing between fields and selecting the green Submit at the bottom once complete.

If you prefer to submit a paper application you can select the Print button at the bottom of the page. Printed applications require an original signature and date noted. Any additional documents will need to be attached and then mailed to the address at the bottom of the form.

Must be a resident of Nevada County to apply.

Profile

Which Boards would you like to apply for?

Mental Health & Substance Use Advisory Board (Nevada County): Submitted

Question applies to multiple boards

Confirm your desired member position:

Family Member of a Consumer

Incumbent?

Yes No

Shannon

First Name

Cotter

Last Name

Home Address

Suite or Apt

City

State

Postal Code

Mailing Address (if different from residence)

Business Address (Optional)

Supervisorial District 1 through 5 (Available from Election Office, 265-1298)

District 3

Time(s) available to attend meetings (days, evenings, etc.)

As scheduled

Email Address

Shannon Cotter

Business Email Address

[Redacted]

[Redacted]

Primary Phone

[Redacted]

Alternate Phone

Are you currently employed with the County of Nevada?

Yes No

Interests & Experiences

Experience: A resume, or additional sheets, may be attached containing any information that would be helpful to the Board in evaluating your application.

Education/Employment Experience

BS: Business Administration-Accounting; minors Management & Ethics Foothills
Compassionate Care: 2025-present County of Nevada: 2022-2025 Hospice of the Foothills:
2019-2022 City of Grass Valley: 2016-2019 California State University-Chico: 2015-2016 The
Union Newspaper: 2008-2014

Community Experience and Affiliations

Citizens for Choice: Treasurer 2022-2024 Business & Professional Women of Nevada County:
Treasurer 2017-2020 Foothills & Truckee Healthy Babies: Community Advisory Board
Member 2013-2021 Union Editorial Board: 2013

List any other County boards, commissions, or committees on which you have served:

N/A

Other experience you feel would be helpful to the Board of Supervisors in making this appointment:

Through navigating our son's mental health, autism, genetic disorder diagnoses and substance use disorder, we have received services from or interacted with a multitude of mental health providers, law enforcement, and various supportive agencies in the community; Children's Behavioral Health, Nevada County Behavioral Health, Victor, Common Goals, Juvenile Court, CSU, GVPD, CHP, Probation, CPS, IEP & ERMHS providers, NAMI, UC Davis MIND Institute, TK Momentum, DOR, ALTA Regional, and private therapists.

References: Please list two references with telephone numbers

Joyce Ash: [Redacted] Marie Kittle: [Redacted]

Upload a Resume

Additional Attachments

Agreement

Applicants may be required by State Law and County Ordinance to file a financial disclosure statement as part of the appointment process. The form may be viewed at <http://www.fppc.ca.gov>. An Oath of Office will be required upon appointment. I have reviewed the Financial Disclosure Statement requirement.

I Agree

Applications must be filed with:

Clerk of the Board of Supervisors - County of Nevada

950 Maidu Ave.

Nevada City CA 95959-8617.

This application is a public document.

Document-16360 Rev 1/2008