## APPLICATION FOR APPOINTMENT TO COUNTY BOARDS/COMMISSIONS AND COMMITTEES

Instructions: You may fill out this application on-line by tabbing between fields. After you have completed the form, print the application by clicking on the Print button at the bottom of the page. Alternatively, you may print the blank form and fill it out by hand. You must sign and date the application. Attach any additional documents and mail to the address at the bottom of the form.

Name of Board/Commission/Committee as listed	d on announcement:	RECEIVED
Connecting Point		
Filing Period (as listed on the announcement):	9-29-2017	SEP 2 9 2017
Type of Member: Regular board member	Incumben	t? O Yes O No NEVADA COUNTY BOARD OF SUPERVISOR
Name: Last Bell	First Judith	
Residence Address (Must be a resident of Nevada	a County) Mailing Address, i	f different from residence
Address 1	Address	
ity N	City	
Supervisorial District 1 through 5 (Avallable from Election Office, 265-1298)	Home Phone with area code	Unlisted?
Email Address	Work Phone with area code	Extension
Time(s) available to attend meetings (days, even	lings, etc.)	A William William
I am a recently retired California RN. I have worked in Obster very active in the Falls Prevention Program during that time)  Community Experience and Affiliations  I am currently the coordinator of the Nevada County Library with the North Columbia Schoolhouse Cultural Center, most evacuation effort during the critisis with the Oroville Dam, an	) I have also worked for a large Pharmaceutical Com  Book Buddy Program. I also did Story Time at Madely ly with the Storytelling Festival and a was for a short	pany, selling women's health products.  yn Helling Library for 1.5 yrs. I am an active volunteer
Other County Boards, Commissions, or Committe	ees on which you have served	
N?A.	ees on which you have sally ea.	
Other experience you feel would be helpful to the sa Senior Outreach Nurse, I worked with two of the program of the program of the same of the program of the same	ms that the Connecting Point Board overseesIHSS, with the clients and the work of these programs. I h	211. Before I was a RN I worked as a social worker in San have a unique picture of the needs of the clients served b
References: Please list two references with teleph	none numbers	
pplicants <u>may</u> be required by State Law and County hay be viewed at <u>http://www.fppc.ca.gov</u> . An Oath have reviewed the Financial Disclosure Statement rec	h of Office will be required upon appointment.	nent as part of the appointment process. The for
have reviewed the I manelar biscipsore statement rec		
Signature	quirement :	Date

Print Form

Document-16360 Rev 1/2008

95959-8617. This application is a public document.