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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 by hand. You must sign and date the application. Attach any additional documents and mail to the address at the bottom of the page.

Name of Board/Commission/Committee as listed on announcement: Mental Health Advisory Board
Filing Period (as listed on the announcement):
Type of Member: Incumbent? Yes X No
Name: Last MALONE First LORI
Residence Address (Must be a resident of Nevada County) Mailing Address, if different from residence
Address
City City State Zip Code
Supervisorial District 1 through 5 (Available 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, evenings, etc.) Flexible
Experience: A resume, or additional sheets, <u>may</u> be attached containing any information that would be helpful to the Board in evaluating your application.
Education/Employment Experience
Bachelor of Science degree, Finance Medical Receptionist- Syears
20 year airline employee - customer service
real estate agent Tructiec - 8 years
NAMI Nevada County Board Member, secretary & Member For 10 years
Other County Boards, Commissions, or Committees on which you have served:
with sound, commissions, or co
Other experience you feel would be helpful to the Board of Supervisors in making this appointment:
I would be honored to be a member of the HHMB. I have over 13 years of first hand experience with severe mental illness and substance abuse with a loved one. Becoming educated on mental health has been a huge part of my life over those 13 years.
References: Please list two references with telephone numbers
Applicants <u>may</u> 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:
Signature Date 11/2/18
Applications must be filed with: Clerk of the Board of Supervisors, County of Nevada, 950 Maidu Ave., Nevada City CA

Print Form

95959-8617. This application is a public document.