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APPLICATION FOR APPOINTMENT TO BOARD OF SUPERVISORS-APPOINTED SPECIAL DISTRICT POSITIONS

DEC 0 3 2020

Name of Special District as listed on announcement: **NEVADA COUNT BOARD OF SUPERVI **NEVADA COUN	
Filing Period (as listed on the announcement):	
Type of Member:	
Name: SMALL MARCIA	
Last	
Resident Address: _ (Must be a resident of Nevada County) Zip Code	
Mailing Address:	
Supervisorial District in which you reside: # 2 (This information is available from the Election Office at 265-1298). Email address Phone Number: *HOME: WORK: *(Indicate if unlisted number) Time(s) available to attend meetings (days, evenings, etc.)	
EXPERIENCE: A resume <u>may</u> be attached containing this and any other information that would be helpful to the Board in evaluating your application.	
Education/Employment Experience:	
Community Experience and Affiliations: Other County Boards/Commissions/Committees on which you have served:	
Other experience you feel would be helpful to the Board of Supervisors in making this appointment:	
REFERENCES: Please list two references with telephone numbers:	2
Date: 12-1-20 Signature: Marcie Small	

Applications must be filed with the Clerk of the Board of Supervisors, County of Nevada, 950 Maidu Avenue, Nevada City, CA 95959-8617. This application is a public document.