



APPLICATION FOR
APPOINTMENT TO COUNTY OF LAKE
ADVISORY BOARD, COMMISSION OR COMMITTEE

RECEIVED

JUN 13 2023

COUNTY OF LAKE
BOARD OF SUPERVISORS /
ADMINISTRATIVE OFFICE

Name of Applicant:

Heather Dowden

Home Address:

3955 Lakeshore Blvd #4

City:

Lakeport CA

ZIP:

Mailing Address:

Same

City:

ZIP:

Occupation:

JHSS care provider

Email:

dowden0608@gmail.com

Home Phone:

707, 533-0388

Work Phone:

()

Supervisory District

Name of Board/Committee/Commission(s) you are interested in serving on:

JHSS ADVISORY BOARD

Board/Committee/Commission category under which you are applying, if applicable:

List past or present County appointments, as well as any other public service appointments, or elected positions held (please list dates served):

Ø

Please briefly explain why you would like to serve, what special qualifications or expertise you may have for the position and any other information you would like to include as part of your application:

I want to make JHSS better. We could get training

List community organizations to which you belong:

Ø

Convictions and Penalties – Have you ever been convicted of a felony? If yes, give date(s), location(s) and penalties. (Convictions are evaluated for each position and are not necessarily disqualifying.)

Ø

List any affiliation you or your spouse has with public service agencies:

Ø

I certify that the above information is true and correct, and I have read the Lake County Advisory Board, Committee and Commission Conflict of Interest Policy. I agree to abide by that policy and to the best of my knowledge, I have no conflict of interest.

interview by phone / Heather Dowden

(Signature)

5/16/23

(Date)

PLEASE RETURN COMPLETED FORM TO:

Clerk of the Board of Supervisors
255 N. Forbes St.
Lakeport, CA 95453
FAX (707) 263-2207

For Board Use Only:

APPOINTED

YES ___ NO ___

APPOINTED ON:

TERM EXPIRES: