



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

RECEIVED

APR 25 2018

COUNTY OF LAKE
BOARD OF SUPERVISORS

Name of Applicant:

Harry Lyons

Home Address:

13806 Clifford Dr.

City:

Lower Lake

ZIP:

95457

Mailing Address:

As Above

City:

ZIP:

Occupation:

Retired College Instructor

Email:

lyons.harry@att.net

Home Phone:

707 994 2024

Work Phone:

707 540 2015

Supervisory District

5

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

Blue Ribbon Committee For Rehabilitation of Clear Lake

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

Rep For Environmental Org. Or BOS Designee

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

Lake County Resource Conservation District
June 2016 to Present. Currently President

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 wish to bring my knowledge as an Academic Ecologist and my communication skills as a teacher to the workings of the committee and its communication with the public and county supervisors.

List community organizations to which you belong:

Redbud Audubon, Lake County Land Trust
Anderson Marsh Interpretive Association

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.)

No

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

Lake County Resource Conservation District

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.

Dr. Harry Lyons

(Signature)

04/25/18

(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: