



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

Name of Applicant: Soledad Aguayo

Home Address: 14625 Pearl Ave

City: Clearlake

ZIP: 95422

Mailing Address: PO Box 2632

City: Clearlake

ZIP: 95422

Occupation: Senior Interventionist

Email: soledad.aguayo@esnorcal.org

Home Phone: (707) 791-5148 Work Phone: (408) 728-5189 Supervisorial District

Name of Board/Committee/Commission(s) you are interested in serving on:
Lake Child Care Planning Council

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):

N/A

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:

To be a steward in the council's mission "to ensure the availability and accessibility of high quality child care for the families and children of our community"

List community organizations to which you belong:

Eastern Star

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:

N/A

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.

Soledad Aguayo
(Signature)

(Signature)

9/4/2020

(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: _____