

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

**CALLAYOMI COUNTY** 

Name of Applicant: Scott Hopkins	
Home Address: 21195 Bush Street City: H	'iddletown ZIP: 95461
D	Tiddletown ZIP: 95461
Occupation: Teacher Email:	hoppy todded agency
Home Phone: (412) 728-2 Work Phone: (707) 994-64	7/ Supervisorial District
Name of Board/Committee/Commission(s) you are interested in serv	ring on:
Board/Committee/Commission category under which you are applying	ng, if applicable:
List past or present County appointments, as well as any other public neld (please list dates served):	service appointments, or elected positions
ist community organizations to which you belong:  Note: I do Volunteer at the property of the	different science subjects
convictions and Penalties – Have you ever been convicted of a felongenalties. (Convictions are evaluated for each position and are not need to be convicted as a felongenalties.	/? If yes, give date(s), location(s) and ecessarily disqualifying.)
st any affiliation you or your spouse has with public service agencies	3:
I certify that the above information is true and correct, and I have Committee and Commission Conflict of Interest Policy. I agree my knowledge, I have no conflict of interest.  (Signature)	e read the Lake County Advisory Board, to abide by that policy and to the best of
LEASE RETURN COMPLETED FORM TO:  Clerk of the Board of Supervises St. Lakeport, CA 15453 FAX (707) 263 2207	For Board Use Only: APPOINTED YES NO APPOINTED ON: TERM EXPIRES: