



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

Name of Applicant: Kevin S Waycik

Home Address: 6849 Rosemont City: Lucerne ZIP: 95458

Mailing Address: P.O. Box 412 City: Lucerne ZIP: 95458

Occupation: _____ Email: RCWaycik333@gmail.com

Home Phone: (707) 274-1488 Work Phone: () Supervisorial District N2421605

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

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):

Casino Robinson Security
15 years retired

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:

List community organizations to which you belong: _____

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.)

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

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.

Kevin S Waycik
(Signature)

12-13-20
(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: _____