



APPLICATION FOR APPOINTMENT

PART I – Personal Information			
Applicant Name (Last, First, and Middle Initial) Mansfield-Chavez, Marlee L	Home Telephone [REDACTED]	E-Mail Address [REDACTED]	
Mailing Address [REDACTED]	City Eureka	State CA	Zip 95501
Residence Address (if different from mailing address)	City	State	Zip
Name of Business, Agency, or Tribe Blue Lake Rancheria Tribal Education Agency	Occupation/Title Assistant Education Director		
Business Address [REDACTED]	City Blue Lake	State CA	Zip 95525
Business Phone 707-668-5101	Business Fax		

Please provide three references (name, address, phone # and e-mail)

1. Tanya Trump, [REDACTED]
2. Jack Bareilles, [REDACTED]
3. Amber Conway, [REDACTED]

Please indicate which industry you represent

PRIVATE INDUSTRY (please specify which sector you represent)

- | | |
|--|---|
| <input type="checkbox"/> Diversified Health Care
<input type="checkbox"/> Building and Systems Construction
<input type="checkbox"/> Management and Innovation Services
<input type="checkbox"/> Forest Products
<input type="checkbox"/> Other: | <input type="checkbox"/> Specialty Food, Flowers, and Beverages
<input type="checkbox"/> Investment Support Services
<input type="checkbox"/> Niche Manufacturing
<input type="checkbox"/> Tourism |
|--|---|

PUBLIC INDUSTRY (please specify which sector you represent)

- | | |
|---|--|
| <input type="checkbox"/> Wagner-Peyser Act
<input type="checkbox"/> Board of Supervisors Representative
<input type="checkbox"/> Assembly/State Representative
<input checked="" type="checkbox"/> Education (specify)
<input type="checkbox"/> Adult <input checked="" type="checkbox"/> K-12

<input checked="" type="checkbox"/> Community Based Organization (specify)
<input checked="" type="checkbox"/> Native American Employment Development
<input type="checkbox"/> Employ People with Barriers
<input type="checkbox"/> Train People with Barriers | <input type="checkbox"/> Economic Development
<input type="checkbox"/> Vocational Rehabilitation
<input type="checkbox"/> Labor Organization

<input type="checkbox"/> College of the Redwoods

<input type="checkbox"/> Child Care
<input checked="" type="checkbox"/> Youth Employment, Training, or Education
<input checked="" type="checkbox"/> Federally Fund Programs/Services for Low-Income Residents |
|---|--|

PART II – Guidelines

The following guidelines have been developed to assist the Board of Supervisors in the process of recruiting and appointing new Workforce Development Board members.

To become a member of the Workforce Development Board, you must:

1. Represent the sector for which you are applying (be an owner of a business, a chief executive/operating officer of a business or agency, or other business executive or employer with optimum policy making or hiring authority).
2. **Private Sector** seats require a formal nomination by an open-membership business organization (i.e., a chamber of commerce or a professional or business organization such as Kiwanis or Rotary), a business trade association, or an agency board of directors. **Labor Union** seats require a formal nomination from a local labor federation. All other seats require no formal nomination. **Your nomination must be secured prior to submitting this application by completing Part III below.**
3. Forward the completed application to:

Workforce Development Board
 825 5th Street
 Eureka, CA 95501
 Attn: Scott Adair, Economic Development Director
sadair@co.humboldt.ca.us

Applicants selected for appointment will be required to file Form 700, Statement of Economic Interest.

For questions or additional information, please call (707)445-7745
or visit our website: <http://gohumco.org/216/Humboldt-County-Workforce-Development-Bo>

PART III – Nomination

PLEASE NOTE: Private Sector and Labor Union applications must secure the nomination and signature as described in Part II - #2 above, prior to submitting the application to the Workforce Development Board.

Blue Lake Rancheria Tribe

 (Agency/Organization/Association Name)

hereby formally nominates

Marlee Mansfield-Chavez

 (Applicant’s Name)

for appointment to the Workforce Development Board of Humboldt County

Jason Ramos

01 / 10 / 2023

Signature of Chair/Director/Chief of Nominating Agency

Date

PART IV – Applicant Certification and Signature

I hereby certify all answers and statements are true and complete to the best of my knowledge. I understand the County may verify information and that untruthful or misleading answers are cause for rejection of this application.

Marlee Chavez

 Signature of Applicant

04 Jan 2023

Date

FOR OFFICE USE ONLY:

Date Rec’d:

Staff:

Submittal Date: