

APPLICANT QUESTIONNAIRE

1.	the Ralph M. Brown Act.					
	Have you ever been participated on a board or committee that adheres to the Brown Act?					
	Yes X No If yes, which one? Workforce Alliance of the North Bay					
2.	Appointment to the Humboldt County Workforce Development Board is a commitment for a two-year term starting the date of appointment by the Board of Supervisors through June 30 th of the following fiscal year. If appointed to the Workforce Development Board, you are expected to attend meetings quarterly. Each meeting of the full Workforce Development Board is approximately three hours long. If appointed to the Workforce Development Board, do you agree to attend these meetings? Yes X No					
3.	Upon appointment to the board, you will be provided with a copy of the current Workforce Development Board bylaws.					
	Do you agree to review and adhere to the Workforce Development Board bylaws? Yes_X_ No					
4.	4. Attendance expectations are outlined in the bylaws. Members of the board must not miss more than three consecutive meetings unless excused and no more than five consecutive meetings, whether excused or unexcused, to maintain your seat on the board. Attendance is tracked, reviewed and recorded in the minutes for each meeting. Failure to adhere to the attendance guidelines may result in termination from the Board. If you expect to be absent from a meeting that you must notify the Chair of the Board and/or the Executive Director of the intended absence by no later than 5:00PM the day prior to the scheduled meeting, to be considered excused. Do you agree to properly notify staff if you are unable to attend a scheduled meeting? Yes X No Do you understand the attendance expectations for this Board? Yes X No					
5.	Applicants selected for appointment will be required to submit a Form 700: Statement of Economic Interest, annually					
	Do you agree to file the Form 700 annually and disclose any conflict of interest? Yes X No					
	For more information on the Form 700 please go to: www.fppc.ca.gov/Form700.html					
R OFFICE USE ONLY:						
te R	ec'd: Staff: Submittal Date:					



APPLICATION FOR APPOINTMENT

	Home Telephone E-Mail Address						
Obera De Luna, Claudia B		:					
Mailing Address	City	•	State	Zip			
	Ukiah	Ukiah		95482			
Residence Address (if different from mailing address)	City		State	Zip			
Name of Business, Agency, or Tribe	Occupation/Title						
Employment Development Department	Employment Program Manager II						
Business Address	City						
2550 N. State Street, Suite 3	Ukiah		CA				
Business Phone	Business Fax	95482					
	Dusiness Fax						
707-460-7745							
Please provide three references (name, phone # and e-mail)							
1. Maria Lucero,							
2. Samuel Martin,							
3. Lisa Marie Benavides,							
Please indicate which industry you represent.							
PRIVATE INDUSTRY (please specify which sector you represe	nt)						
Diversified Health Care	Diversified Health Care Specialty Food, Flowers, and Beverage			verages			
Building and Systems Construction		Investment Support Services					
Management and Innovation Services		nufacturing					
Forest Products	Tourism						
Other:							
	-1	PUBLIC INDUSTRY (please specify which sector you represent)					
✓ PUBLIC INDUSTRY (please specify which sector you represent	:)						
✓PUBLIC INDUSTRY (please specify which sector you represent ✓ Wagner-Peyser	Public Ec	onomic Devel	500	Agency			
PUBLIC INDUSTRY (please specify which sector you represent Wagner-Peyser Board of Supervisors Representative	Public Ec	al Rehabilitati	500	Agency			
PUBLIC INDUSTRY (please specify which sector you represent Wagner-Peyser Board of Supervisors Representative Assembly/State Representative	Public Ec	al Rehabilitati	500	Agency			
PUBLIC INDUSTRY (please specify which sector you represent Wagner-Peyser Board of Supervisors Representative Assembly/State Representative Education (specify)	Public Ec Vocation Labor Un	al Rehabilitati ion	500	Agency			
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PUBLIC INDUSTRY (please specify which sector you represent Wagner-Peyser Board of Supervisors Representative Assembly/State Representative Education (specify) Adult K-12	Public Ec Vocation Labor Un	al Rehabilitati ion cation	500	Agency			
PUBLIC INDUSTRY (please specify which sector you represent Wagner-Peyser Board of Supervisors Representative Assembly/State Representative Education (specify) Adult Community Based Organization (specify)	Public Ec Vocation Labor Un Higher Educ	al Rehabilitati ion cation	on				
✓ PUBLIC INDUSTRY (please specify which sector you represent ✓ Wagner-Peyser ☐ Board of Supervisors Representative ☐ Assembly/State Representative ☐ Education (specify) ☐ Adult ☐ K-12 ☐ Community Based Organization (specify) ☐ Native American employment development	Public Ec Vocation Labor Un Higher Educ	al Rehabilitati ion cation	on				

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:

- 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).
- 1. Secure a Nomination. A nomination must be secured prior to submitting this application by completing Part III below. Guidelines for nominations are as follow:

Private Sector seats require a formal nomination by an open-membership business organization, a sitting WDB business member or 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 a nomination from a senior executive from the agency or institution of employment or affiliation.

2. Forward the completed application to:

Workforce Development Board

825 5th Street

Eureka, CA 95501

Attn: Workforce Development Coordinator

workforce@co.humboldt.ca.us

Selected applicants will be required to file Form 700: Statement of Economic Interest, annually.

For questions or additional information, please call (707)445-7745

or visit our website: https://www.gohumco.com/162/HC-WDB-Meetings-and-Governance

PART III – Nomination							
PLEASE NOTE: All applicants must secure the nomination and signature as described in Part II - #2 above, <u>prior</u> to							
submitting the application to the Workforce Development Board.							
Employment Development Department							
(Agency/Organization/Association Name)							
hereby formally nominates							
Claudia Obera De Luna							
(Applicant's Name)							
for appointment to the Workforce Development Board of Humboldt County							
Maria Lucero	04/08/2025						
Signature of Senior Executive of Nominating Agency	Date						
Maria Lucero	Deputy Division Chief						
Print Name	Title						
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.							
Car Blure	04/08/2025						
Signature of Applicant	Date						