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AUG - 7 2018  
ECONOMIC DEVELOPMENT

**APPLICATION FOR APPOINTMENT**

PART I – Personal Information			
Applicant Name (Last, First, and Middle Initial) Margaret Talcott, MSW	Home Telephone [REDACTED]	E-Mail Address margaret-talcott@redwoods.edu	
Mailing Address [REDACTED]	City [REDACTED]	State [REDACTED]	Zip [REDACTED]
Residence Address (if different from mailing address)	City	State	Zip
Name of Business, Agency, or Tribe College of the Redwoods, Adult Education	Occupation/Title Interim Director		
Business Address 310 Third Street, Suite C	City Eureka	State CA	Zip 95501
Business Phone 707-476-4521	Business Fax		

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

1. Angelina Hill	[REDACTED]	[REDACTED]	[REDACTED]
2. Tina Wahlund,	[REDACTED]	[REDACTED]	[REDACTED]
3. Wendy Bates,	[REDACTED]	[REDACTED]	[REDACTED]

Please indicate which industry you represent

PRIVATE INDUSTRY (please specify which sector you represent)

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

PUBLIC INDUSTRY (please specify which sector you represent)

- |   |   |
|---|---|
| <input type="checkbox"/> Wagner-Peyser Act                      | <input type="checkbox"/> Economic Development                     |
| <input type="checkbox"/> Board of Supervisors Representative    | <input type="checkbox"/> Vocational Rehabilitation                |
| <input type="checkbox"/> Assembly/State Representative          | <input type="checkbox"/> Labor Organization                       |
| <input checked="" type="checkbox"/> Education (specify)         |   |
| <input checked="" type="checkbox"/> Adult                       | <input checked="" type="checkbox"/> College of the Redwoods       |
| <input type="checkbox"/> K-12                                   |   |
| <input type="checkbox"/> Community Based Organization (specify) |   |
| <input type="checkbox"/> Native American Employment Development | <input type="checkbox"/> Child Care                               |
| <input type="checkbox"/> Employ People with Barriers            | <input type="checkbox"/> Youth Employment, Training, or Education |

Train People with Barriers

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  
520 E Street  
Eureka, CA 95501  
Attn: Allison Tans, WDB Executive Director  
[altans@co.humboldt.ca.us](mailto:altans@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://humboldt.gov/1709/Workforce-Development-Board>

### 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.**

\_\_\_\_\_  
(Agency/Organization/Association Name)

hereby formally nominates

\_\_\_\_\_  
(Applicant's Name)

for appointment to the Workforce Development Board of Humboldt County

\_\_\_\_\_  
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.*

  
\_\_\_\_\_  
Signature of Applicant

  
\_\_\_\_\_  
Date

FOR OFFICE USE ONLY: