

APPLICATION TO SERVE ON
HUMBOLDT COUNTY
BEHAVIORAL HEALTH BOARD

1) Name: Valetta Molofsky

2) Address: _____

3) Email: _____

4) Telephone: _____

5) Supervisorial District: Steve Madrone

6) Occupation: Cultural Educator

7) Category:

Consumer Family of Consumer TAY Other

8) Prior Advisory Board or Commission Experience Yes No

9) Personal References:

Name: Doug Smith Telephone: _____

Name: Amy Cirincione O'Connor Telephone: _____

10) Please write a brief statement describing why you are interested in serving on the Humboldt County Behavioral Health Board:

My interest in the Humboldt County Behavioral Health Board comes from my passion for promoting and advocating wellness and sustainable programs for underserved communities previously at Open Door Clinic on their Quality Control Committee and as a representative of the Black Student Union, and member of the NAACP.

With the rising numbers of COVID 19, job instability, food insecurity, and school services changing I'm concerned about suicidal ideation, AOD, and broken homes leading to a mental health crisis. As a board member, I hope to offer support, research, and a voice for the People of Color in the community.

Current Date 6/25/12 Signature Valetta Molofsky 8/20/2020

Please send this application to:
ATTN. Joe McManus
Humboldt County Behavioral Health Board
720 Wood Street
Eureka, CA 95501

For Office Use Only: Date to BOS: Approved Not Approved

APPLICATION TO SERVE ON
HUMBOLDT COUNTY
BEHAVIORAL HEALTH BOARD

1) Name: Alissa Norman

2) Address: _____

3) Email: _____

4) Telephone: _____

5) Supervisorial District: 3

6) Occupation: Community Advocate at Tri-County Independent Living

7) Category:

Consumer Family of Consumer TAY Other

8) Prior Advisory Board or Commission Experience Yes No

9) Personal References:

Name: Lisa Leon Telephone: _____

Name: Donalyn Sjostrand Telephone: _____

10) Please write a brief statement describing why you are interested in serving on the Humboldt County Behavioral Health Board:

As a Consumer and Professional Community Advocate, I find myself concerned with the quality of care, quality of life, autonomy, and greater recovery outcomes made available to fellow consumers of mental health services. I also find myself in an incredibly unique position, a position of educational and employment privilege, allowing me to fully engage in this opportunity of being able to participate in Community Advocacy on a systemic level on the Humboldt Behavioral Health Board. I have time available to participate in board meetings, and time at my disposal to execute required tasks. I will be fully engaged.

Current Date 8/25/20 Signature *Alissa Norman*

Please send this application to:

ATTN. Joe McManus
Humboldt County Behavioral Health Board
720 Wood Street
Eureka, CA 95501

For Office Use Only: Date to BOS: Approved Not Approved