APPLICATION TO SERVE ON HUMBOLDT COUNTY BEHAVIORAL HEALTH BOARD

1)Name: Tracie Conner					
2)Address: 1		3.00			
3)Email:	American			200	
4)Telephone					
5)Supervisorial District: District 1					
6)Occupation: Registered Emergence	cy Nurse		. 1114 AT 11 NY SACES A		
7)Category:					
Consumer Family of Con	nsumer	☐ TAY		○ Other	
8)Prior Advisory Board or Commission Ex	xperience			☐ No	
9)Personal References:					
Name: Kelsey McCulloch		Telephone:	<u>.</u>		
Name: Phillip Maddux		Telephone:	\$\frac{1}{2} \cdot 2\frac{1}{2}	and the second s	
10)Please write a brief statement describ Humboldt County Behavioral Health		ou are intere	sted in	serving on	the
My husband and I were born and raised in as well. I have worked as a registered nurse 14 years and have seen countless behavior county is lacking. My husband is a captain the need for better behavioral health services ponder/healthcare side would be benning possibly some solutions from the healthcare.	e in the Eme ral health pa with Humb ces in the co ificial to the	ergency Depar atients reques soldt Bay Fire I bunty first har board. I hope	ting res Departi Id. I fee to pro	at St. Joes for sources whice ment and ha el a voice fro svide insight	or the past ch the ss seen m the first and
Current Date 9920 Gignature	Pac	io Coe	uu	ue	en –
Please send this application to: ATTN. Joe McManus					`
Humboldt County Behavioral Health Boar	rd				
720 Wood Street	-				
Eureka, CA 95501					
For Office Use Only: Date to BOS:		Approved		☐ Not A	Approved

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1)Name: Madison Flynn	The state of the s			
2)Address:				
3)Email:				
4)Telephone		<u> </u>	<u>. 1846, 1878 89 186 .</u>	
5)Supervisorial District	t: District 2		<u> </u>	
6)Occupation: Assistan	t Director		State of the state	
7)Category:				
Consumer	Family of Consumer	<u></u> ТАҮ	⊠ Other	
8)Prior Advisory Board	or Commission Experience		☐ No	
9)Personal References	:			
Name: John Reeves III		Telephone:	<u>& </u>	
Name: Megan Siaosi		Telephone:	-	
	statement describing why Behavioral Health Board:	you are intere	sted in serving on the	
the mental health our Native American and community needs mo healthier parternships advocate for stronger I currently sit on the U	serving in the Humboldt Co community is very importar a Wiyot Tribal Member and are representation on a cour s and better understanding of services. United Indian Health Service per-at-Large for the Wiyot Tr	nt to me and w I feel that beh ity level. With of our commur is (UIHS) Boar	vithin my community. I am avioral health within my more representation, nities can collaborate to	
Thank you for your co	onsideration.			
Current Date 9/25/202	20 Signature	M)	W.	
Please send this applic	cation to:			
ATTN. Joe McManus				
Humboldt County Beha 720 Wood Street	avioral Health Board			
Eureka, CA 95501				
For Office Use Only: Date	e to BOS:	Approved	☐ Not Approved	