Profile			
Cynthia First Name	Condos Last Name		
Full/Legal Name (if different that	n name provided above)		
Cindi Ann Condos			
Email Address			
Primary Phone	Alternate Phone		
Street Address		Suite or Apt	
City		State	Postal Code
Mailing Address (if different than Street/Physical address)			
Are you currently registered to	vote at the Street Address you p	rovided?	
⊙ Yes ○ No			
Note: If you answered "No" to the previous question and do not upload an <u>Alternate</u> <u>Document Proving Mendocino County Residency</u> or <u>a Request for a Residency Waiver</u> , <i>your application will not be processed</i> .			
Upload Alternate Proof of Residency or Request for Residency Waiver			
Which Boards would you like to apply for?			
Policy Council on Children and Youth (PCCY): Submitted			
Which position, seat, or represe	ntational category would you p	refer?	
Rural Health Clinic			
Availability to Attend Meetings			
□ Day Meetings □ Ukiah Only			

Availability to Attend Meetings (Other)			
Interests & Experiences			
Special Expertise, Experience,	or Interest in This Area?		
2017, as well as an active member committee. I currently serve on othe the Obesity Medicine Association P	rics at Hillside Pediatrics (MCHC). I have been on this committee since of the Children's Health Committee and The Children's Trauma er national children's medical committees medical committee's including ediatric Obesity Committee as well as participation in a Project ECHO ave served on the Mendocino County Selpa rewrite committee in the school boards in the past.		
Upload a Resume			
Upload Additional Supporting Documents			
Upload Additional Supporting Documents			
Upload Additional Supporting Documents			

Certification

Please read the following statements and indicate your acceptance thereof.

I hereby certify that I am a resident in the State of California, County of Mendocino and am at least 18 years of age. I am not imprisoned or on parole for the conviction of a felony. I certify under penalty of perjury, under the laws of the State of California, that the information on this application is true and correct. I understand that assuming this public responsibility could result in public knowledge of my background and/or qualifications, including financial interests. Applications will be kept on file for one year.

✓ I Agree *