Profile				
George	West			
First Name	Last Name			
Full/Legal Name (i	f different than name prov	ided above)		
Email Address				
Primary Phone	Alternate Phone			
Street Address		Suite o	or Apt	
City		State	Postal C	Code
Mailing Address (i	f different than Street/Phy	sical address)		
Alternate Docume Residency Waiver, Upload Alternate Proof of Residence for Residency Waiver Which Boards wou	ered "No" to the previous quest of the previ	nty Residency ne processed.		
Which position se	eat, or representational cat	egory would y	ou prefer?	
	at, or representational cat	egory would y	ou prefer:	
County B				
Availability to Atte	end Meetings			
✓ Day Meetings✓ Ukiah Only				
Availability to Atte	end Meetings (Other)			

Submit Date: Mar 03, 2025

Interests & Experiences Special Expertise, Experience, or Interest in This Area? Disabled Person perspective Upload a Resume 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 *