## Profile

Cici First Name Winiger

Last Name

#### Full/Legal Name (if different than name provided above)

### Maria Cecilia Winiger

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 provided?

#### ⊙ Yes ⊖ No

# Note: If you answered "No" to the previous question and do not upload an <u>Alternate Document Proving Mendocino County Residency</u> or <u>a Request for a</u> <u>Residency Waiver</u>, your application will not be processed.

Upload Alternate Proof of Residency or Request for Residency Waiver

# Which Boards would you like to apply for?

Civil Service Commission: Submitted

### Which position, seat, or representational category would you prefer?

District 2 Rep

### **Availability to Attend Meetings**

Night Meetings

- Day Meetings
- Ukiah Only
- Other (Please Specify Below)

If day, afternoon is best or virtual

# **Interests & Experiences**

# Special Expertise, Experience, or Interest in This Area?

Communications, marketing, social media, crisis communications, healthcare, community outreach, social responsibility

Cici\_Winiger\_Resume.pdf

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 \*