Profile				
Denise	Gorny			
First Name	Last Name			
Full/Legal Name (if different	than name provided al	oove)		
Email Address	_			
Primary Phase	Altamata Plana			
Primary Phone	Alternate Phone			
Chroat Address			Cuito ou Ant	
Street Address			Suite or Apt	
City			State	Postal Code
Mailing Address (if different	t than Street/Physical a	ddress)		
Are you currently registered	d to vote at the Street A	ddress you pr	ovided?	
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	or			
Which Boards would you like	ke to apply for?			
Child Care Planning Council: Su	ubmitted			
Which position, seat, or rep	resentational category	would you pre	efer?	
Child care planning council				
Availability to Attend Meeting	ngs			•
□ Day Meetings				
Availability to Attend Meeting	ngs (Other)			

Interests & Experiences Special Expertise, Experience, or Interest in This Area?				
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 *