Profile

Eileen First Name Bostwick

Last Name

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

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</u> <u>Document Proving Mendocino County Residency</u> or <u>a Request for a 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?

Area Agency on Aging - Governing Board: Submitted

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

At large member

Availability to Attend Meetings

☑ Day Meetings

Availability to Attend Meetings (Other)

Interests & Experiences

Special Expertise, Experience, or Interest in This Area?

see attached

bostwick-11202019133154.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 registered voter in the State of California, County of Mendocino, a citizen of the United States, and will be at least 18 years of age at the time of the next election. 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 *