 **MEMBERSHIP**

##### APPLICATION FORM

|  |  |  |  |
| --- | --- | --- | --- |
| **Person Nominated:** |  | **Title:** |  |

|  |  |
| --- | --- |
| **Business Name:** |  |

|  |  |
| --- | --- |
| **Business Address:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Telephone:** |  | **FAX:** |  | **E-mail:** |  |

|  |  |
| --- | --- |
| **Organization submitting nomination:** |  |
|  | **(ie: Chamber of Commerce, Manufacturing Association, etc.)** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Contact Person:** |  | **Title:** |  |

|  |  |
| --- | --- |
| **Business Address:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Telephone:** |  | **FAX:** |  | **E-mail:** |  |

***(A letter of nomination is required and must be attached to this application or forwarded under separate cover.)***

**Area of Representation (check all that apply):**

|  |  |
| --- | --- |
| **Business**  **Workforce**  Labor organizations  Joint labor-management apprenticeship program or apprenticeship program  CBO w/Barrier  Youth  **Education & Training**  Adult Education/Literacy Representative  Higher Education Representative  Local Ed/CBO w/Training Barrier | **Governmental and Economic and Community Development**  Economic & Community Development  Wagner-Peyser Representative  Vocational Rehabilitation Representative  Transportation/Housing/Public Assistance  Philanthropic Organization  **Other** |

Signature Date

I hereby submit my application for membership on the Local Workforce Development Board to Golden Sierra Job Training Agency. I have completed and included the following: narrative questions, conflict of interest and nomination letter.

**Return all information to: Melissa Keefe, Administrative Analyst**

### Golden Sierra Job Training Agency

### 115 Ascot Drive, Suite 140

**Roseville, CA 95661**

**NARRATIVE QUESTIONS**

**What specific experience/expertise do you possess which would be of value to the Workforce Development Board?**

## Why would you be a good candidate to serve on the Workforce Development Board?

You may attach additional information, including your resume or biography. Further questions should be directed to Melissa Keefe at Golden Sierra Job Training Agency at (916) 773-8544.

CONFLICT OF INTEREST INFORMATION

1. Does your employer/company provide goods and/or services to Golden Sierra Job Training Agency, or have any plans to provide goods and/or services to Golden Sierra Job Training Agency in the future? Yes  No If yes, please describe below:

1. You will be setting policy for and possibly allocating funds to community-based organizations, profit and non-profit corporations, school districts and other governmental entities or program operators. Do you or any member of your immediate family have any affiliation with such entities (i.e., ownership; employment; contractual relationships, including Golden Sierra-funded On-the-Job Training (OJT) program participation; commission, board or committee membership)? Yes  No  If yes, identify below the name of the entity and the nature of the affiliation. *(Immediate family members are: wife, husband, son, daughter, mother, father, brother, brother-in-law, sister-in-law, father-in-law, mother-in-law, aunt, uncle, niece, nephew, step-parent or step-child.)*

1. Do you, or any member of your immediate family (as defined above), have any ownership interest in any commercial real property that is currently leased/rented by Golden Sierra Job Training Agency? Yes  No  If yes, please describe such property by size and location.

If your nomination or application is approved, you will be required to file a limited conflict of interest form with Golden Sierra Job Training Agency prior to assumption of Workforce Development Board membership.

Signature of Applicant Date