



WORKFORCE ALLIANCE OF THE NORTH BAY

DRIVING WORKFORCE TALENT

Application for Regional and/or Local Advisory Subcommittee Membership

In accordance with the Workforce Innovation and Opportunity Act of 2014 (WIOA), the Workforce Alliance of the North Bay (WANB) Governing Board has established a Regional Workforce Development Board (WDB) for Napa, Marin, Lake and Mendocino counties which sets policy for and provides oversight of workforce development programs in the four counties. Workforce Development Board members are appointed by the Governing Board to represent specified sectors of the community as listed in Section IV below. The county advisory subcommittees were created to make recommendations to the full WDB that specifically pertain to their respective county's employers and their workforce. There is a sub committee for each of the WANB counties.

Individuals interested in serving on the WDB or workforce committee must complete and submit this application for appointment. This application and the related Nomination Form(s), if any, may be subject to public disclosure.

Please indicate which group you are applying for:

- Regional Workforce Development Board (WDB)
 Advisory Subcommittee for _____ county

Section I. Personal Information

First Name: Last Name: M.I.:

Home Address: City: Zip:

Mailing Address: City: Zip:

Home Phone: Alternate Phone:

Email Address:

Section II. County / Location

Provide the county in which your residence, business or organization is located:

Section III. Occupational Information

Industry Sector:

Occupation / Title:

Employer:

Employer Address:		
City:	State:	Zip:
Employer Phone:		
Section IV. Eligibility Certification		
<p><i>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</i></p>		
<input type="checkbox"/> Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input type="checkbox"/> Y <input type="checkbox"/> N) <i>Name of Business:</i>		
<input type="checkbox"/> Labor Organization <i>Name of Organization:</i>		
<input type="checkbox"/> Joint Labor-Management Apprenticeship Program <i>Name of Organization:</i>		
<input type="checkbox"/> Community-based Organization <i>Name of Organization:</i>		
<input type="checkbox"/> Adult Education and Literacy <i>Name of Provider:</i>		
<input type="checkbox"/> Higher Education <i>Name of Institution:</i>		
<input type="checkbox"/> Economic and Community Development <i>Name of Entity:</i>		
<input type="checkbox"/> State Employment Office		
<input type="checkbox"/> Vocational Rehab <i>Name of Program:</i>		
Section V.		
Describe how your participation on the WDB would advance Workforce Development programs.		

Please be advised that members of the Workforce Development Board:

- **May be required to take an Oath of Office.**
- **Must comply with the County's Ethics Ordinance.**
- **Must participate in State-mandated ethics training.**
- **Must disclose financial interests as required by the County Code (Form 700).**
- **Must report any conflicts of interest as required by the County Code.**

I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.

Signature	Date

Send completed applications to:

Workforce Alliance of the North Bay
1546 First Street
Napa, CA 94559

or email to:
boardadmin@workforcealliancencorthbay.org