

# **County of Santa Cruz**

# **BOARD OF SUPERVISORS**

701 OCEAN STREET, SUITE 500, SANTA CRUZ, CA 95060-4069 (831) 454-2200 FAX: (831) 454-3262 TDD: (831) 454-2123

JANET K. BEAUTZ FIRST DISTRICT ELLEN PIRIE SECOND DISTRICT MARDI WORMHOUDT THIRD DISTRICT TONY CAMPOS FOURTH DISTRICT JEFF ALMQUIST FIFTH DISTRICT

**AGENDA:** 2/27/01

February 9, 2001

BOARD OF SUPERVISORS County of Santa Cruz 701 Ocean Street Santa Cruz, CA 95060

RE: APPOINTMENT TO COMMISSION ON DISABILITIES

Dear Members of the Board:

I recommend the appointment of the following person to the Commission on Disabilities in accordance with County Code Chapter 2.72, Section 40, for a term to expire April 1, 2003:

> Jenny T. Sarmiento 300 Meadowlark Lane Aptos, CA 95003 688-0257 (H) 454-2200 (B)

Sincerely yours, TONY CAMPOS, Supervisor

Fourth District

TC:ted

cc: Jenny Sarmiento Commission on Disabilities

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### APPLICATION FOR APPOINTMENT TO A COUNTY ADVISORY BODY

## **INSTRUCTIONS:**

If you are interested in serving on a County Advisory Body, please complete this application and return it to the Board of. Supervisors, 701 Ocean Street, Room 500, Santa Cruz, CA 95060-4069. If you are interested in-being considered for appointment to more than one advisory body, a separate application must be submitted for each appointment you are seeking.

Upon receipt, your application for appointment will be routed to each Board member and then filed for further consideration by Board members when there is a vacancy on the advisory body. If a Supervisor is interested in nominating you for appointment, you will be contacted to discuss the appointment, the appointment process, and requirements for the advisory body in question.

Please specify the Commission, Committee or Board to which you are seeking appointment and-provide the requested information.

Thank you for your interest in County Government.

COMMISSION, COMMITTEE or BOARD:

Name:

Address:

Phone: (Home)

(Business)

Supervisorial District:

Length of Residence in Area:

VENNY 1. DARMIENTO
300 MERDOWLARK LN
APTOS, CA 95003
(831) 688-0257
(83) 454-2200
SECOND
4 yes

DISABILITIES

Age (Optional) : 🗋 Under 21 🗋 21-30 🗋 31-40 🖬 Over 40

PREVIOUS COMMISSION OR COMMITTEE SERVICE (Please specify):

Advisorv Bodv Term

(Please see reverse)

#### EDUCATION:

<u>Institution</u>	Major		Degree	Year
STSU	CARCE	2. Developmen	T - PURSUIN	E MA
C.S.U. Full	RTON	Sociology	BA	

WORK/VOLUNTEER EXPERIENCE: -

Organization Address Position Year Co. SC. BOARD OF SUPERVISORS TOI OCEAN, ADMINISTRATIVEADE PRESENTRY CAREERWORKS 1040 EMILINE, SC. SR. EMPLOYMENT SPECIALIST 1997-2001 FAMILY SERVICES PASIARO VALLEY BOARD MEMBER 1997-PRESENT

#### STATEMENT OF QUALIFICATIONS:

Please attach a brief statement indicating why you are interested in serving on the advisory body in question and why you are qualified for appointment.

#### CERTIFICATION

I certify that the above information is true and correct and authorize the verification of-the information in the application in the event I am a finalist for the appointment.

Jenny T. Sarmiento Signature

2/8/01

# **Statement of Qualifications**

Since 1990, I have been the legal guardian of an adult sibling who is physically and developmentally disabled. Prior to 1990, I was actively involved in her educational, recreational, and living arrangements. I have first-hand experience interacting with regional centers in Santa Cruz and Orange County, as well as skill centers and day programs. I am also knowledgeable of the needs of the Latino community when there is a disabled child or adult in the family.