



County of Santa Cruz

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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: 11/20/01

November 1, 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, 2005:

John D. Crowder
3245 Clares Street, Unit 107
Capitola, CA 95010
477-0908 (H)

Very truly yours,

ELLEN PIRIE, Supervisor
Second District

EP:ted

cc: John Crowder
Commission on Disabilities

2830A2

County Commissions

From: <Applicant@CommissionWebPage>
To: <county.commissions@co.santa-cruz.ca.us>
Sent: Tuesday, October 09, 2001 6:53 PM
Subject: Commission Application

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APPLICATION FOR APPOINTMENT TO A COUNTY ADVISORY BODY

If you are interested in serving on a County Advisory body, please complete this application and click on the SUBMIT YOUR APPLICATION button. If you are interested in being considered for appointment for more than one advisory body, a separate application must be submitted for each appointment you are seeking.

Upon receipt, your application for appointment must 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: Disabilities

Name: John D. Crowder

Address The Dakota - Unit 107, 3245 Clares Street
Capitola, California 95010-2560

Email Address: dasmilingirishman@earthlink.net

Phone (Home): 831-477-0908

Phone (Business):

Supervisory District: 2

Length of Residence in Area 10 years

Age (optional): Over 40

PREVIOUS COMMISSION OR COMMITTEE SERVICE (Please Specify):

Advisory Body Term

EDUCATION:

<u>Institution</u>	<u>Major</u>	<u>Degree</u>	<u>Year</u>
Woodbury College, Los Angeles, CA	Economics/Marketing	BS	1969
De Anza College, Cupertino, CA	Cultural Anthropology		

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WORK/VOLUNTEER EXPERIENCE

<u>Organization</u>	<u>Address</u>	<u>Position</u>	<u>Years</u>
OSC Systems Graphics	Fremont, CA	VP Marketing	1992-94
Delch Computer Systems	Milpitas	VP Worldwide Marketing	1990-92
Viable Technologies	Sunnyvale, CA	President	1985-90

STATEMENT OF QUALIFICATIONS:

I have lived a very fruitful life as a disabled person who has suffered with Chronic Progressive Multiple Sclerosis for almost 30 years. I have very successfully thrived in business and been active in privately advocating for my sisters & brothers in dealing with the wide variety of problems & issues unique to those of us with accessibility, health, insurance and educational choices that require thinking beyond the pale.

CERTIFICATION:

By checking this box and entering the date, 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. Certified 10/09/ 01