

County of Santa Cruz 0087

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: 2/26/02

February 15, 2002

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

> RE: AT-LARGE APPOINTMENT TO THE WORKFORCE INVESTMENT BOARD (REPRESENTING BUSINESS)

Dear Members of the Board:

I recommend the appointment **of** the following person to the Workforce Investment Board, as an at-large business representative, in accordance with County Code Chapter 2.110, Section 20, for a term to expire June 30, 2002:

> Ruth A. Keeley P.O. Box 6300 Santa Cruz, CA 95063 464-2738 (H) 479-5515 (B)

Sincerely,

JANET K. BEAUTZ, Supervisor First District

JKB:ted Attachment

cc: Ruth A. Keeley Workforce Investment Board

3220C1

APPLICATION FOR APPOINTMENT TO THE SANTA CRUZ COUNTY WORKFORCE INVESTMENT BOARD FOR WORKFORCE INVESTMENT ACT

INSTRUCTIONS

If you are interested in serving on this board, please complete the following application and supplement and return to the Interim Workforce Investment Board, c/o Human Resources Agency/Workforce Investment Board, 1040 Emeline Avenue, Building E, Santa Cruz, California 95060. This application will be forwarded on your behalf to the Board of Supervisors for their consideration and final approval.

Thank you for yo	ur interest in Co	unty Governme	nt.	,			
<u>Name</u>		Kuth	A	Kee	ley		
<u>Address</u>		P. O.	Box	6300)		
		Santa	Cr4	Z (: A	9506	3-6300
<u>Phone</u>	(Home)	(831) 4	64-27	38			
	(Business)	(831) 47	9-551	5			
<u>FAX</u>		(831) 47	9-55	58		-	
<u>Email Address</u>		rkeel	ey @	onei	11,0	om	
<u>Job Title</u>		H.R. O'Nei	Man	ager			
Organization Rep	resented	O'Nei	11, Fr	nc			
Supervisorial Dis	trict		,		11 - 1 - 1	an a	
Length of Reside	<u>nce in Area</u>	10 42	ars				
PREVIOUS COM	MISSION OR CO	MMITTEE SER	VED (Plea	<u>se specify</u>)		
Ad	<u>visorv Bodv</u>			<u>Ter</u>	<u>m</u>		
EDUCATION							
Institution		<u>Maior</u>	<u>]</u>	<u>Dearee</u>			<u>Year</u>
515	Sa	cial work		BA			

	WORK	ORCE	INVESTMENT	BOARD - APPLICATION SUP	PLEMENT	
	$\mathcal{O}_{\mathcal{U}}$	1	Vacia			0089
Name: _	Kuth	H-	REEley	Date: _	121-07	

Please provide the information requested below as it relates to the category of the Workforce Investment Board (WIB) nomination you are seeking.

Workforce Investment Board areas for nominations - Please check one box:

- 1. [X] Business (Private Sector/Non-Governmental)
- 2. [] Employment Development Department
- 3. [] Economic Development Agency
- 4. [] Community Services Block Grant
- 5. [] Title V of the Older Americans Grant
- 6. [] Migrant and Seasonal Farmworker Programs
- 7. [] Representatives from Local Jurisdictions
- 8. [] Vocational Rehabilitation
- 9. [] Organized Labor
- 10. [] Community Based Organization
- 11. [] Economic Development Agency
- 12. [] Public Assistance Agency (Welfare to Work, CalWORKs)
- 13. [] Education

ation		
Adult Education	}	Circle One
Post-Secondary Education	}	
Local School Board	}	

If you checked box 1, please complete question 14. If you checked box 2-13 please go to question 15.

14. What is the name of your business?

	/ Name of Business		
(a)	Are you the Chief Executive or Owner	Yes	No <u>X</u>
(b)	Are you the Chief Operating Officer	Yes	No <u>人</u>
(c)	Do you nave substantial management or policy responsibility	Yes <u>X</u>	No

(If you answered no to a, b, and c your application cannot be considered by the Board of Supervisors)

(d)	Number of	employees	at the	Santa	Cruz	County	facility	-	_57
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- (e) Is the business minority owned or operated Yes ____ No \underline{X}
- (f) Please check the box indicating which Chamber of Commerce is nominating you:

[]

[X]

[]

Capitola

Soquel

Santa Cruz

- [1 Aptos
- [1 San Lorenzo Valley
- I 1 Scotts Valley
- [1 Pajaro Valley

15) What is the name of organization which nominated you? This organization may also be your employer.

	Organization Na	ame	
WORK/VOLUNTEER EXPERI	ENCE		
Organization	Address	Position	Year
Santa Cuyz SitRM		President	95/96
			i
STATEMENT OF QUALIFICA	TIONS		

Please attach:

• your business card; and

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

CERTIFICATION

I certify that the information on this application and supplement is true and correct and l e the verification of the information in the application in the event l am a finalist for

t e app intment. Signature



For Private Sector Representatives Only:



Single Slate Nominee of local Santa Cruz County General business organization

Nominating Organization

Authorizing Signature

Date

N:\BW00\WIB\WIB Recruitment\WIB application.wpd

O'Neill 107141st Avenue PO. Box 6300 Santa Cruz, California USA 95063-6300

tel: (83 I) 475-7500 fax: (83 I) 475-0544





January 21,2002

Workforce Investment Board 1040 Emeline Avenue Santa Cruz, CA 95060

ATTN: Kathy Zwart, Workforce Investment Board Director

Dear Kathy:

Enclosed is my application for **an** appointment to the Santa Cruz County Workforce Investment Board. I appreciate the opportunity to serve on this community board.

Our company is a long time member of the Santa Cruz business community and it would be a pleasure to represent O'Neill on the board. We have a particular interest in youth, both as consumers and as employees. I am personally interested in the development of youth in the workforce. I believe it is important for the business community to work with educational institutions, governmental agencies and other organizations toward the mutual goal of strengthening the skills of our youth,

I look forward to working with WIB toward this goal.

Sincerely,

Ruth A. Keeley, SPHR Human Resources Manager