

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: 6/18/02

June 12, 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 representative of Business, in accordance with County Code Chapter 2.110, Section 20, for a term to expire June 30, 2006:

Louis J. Tuosto 4701 Soquel Drive Soquel, CA 95073 462-2381 (H) 475-3723 (B)

Sincerely Yours,

fONY (AMPO), Supervisor

Fourth District

TC:ted

cc: Louis J. Tuosto

Workforce Investment Board

3134A4

APPLICATION FOR APPOINTMENT TO THE SANTA CRUZ COUNTY WORKFORCE INVESTMENT BOARD

FOR

WORKFORCE INVESTMENT ACT

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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/CareerWorks, 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 y	our interest in Co	unty Governmenf.		
<u>Name</u>			J-Tuo:	
<u>Address</u>			soque	
		SOQU	el. Ct	
<u>Phone</u>	(Home)	831 4	62-2381	
	(Business)		475-372	3
Supervisorial Di	strict	JAW	Beaut	2
Length of Resid	ence in Area		25 years	3
PREVIOUS COM	IMISSION OR CO	MMITTEE SERVED (Please specify)	
	dvisorv Bodv		<u>Term</u>	
Capitola	CHamber		97.	-99
Relational	CHamber Resources	<u> </u>	87-	89
Latino du	am ber		96-Cc	ment
EDUCATION				
Institution	~ 11	<u>Major</u>	<u>Degree</u>	<u>Year</u>
Ohlo	ME College	science	A.A.	79
CABRII	16 College	science Business	1.5.	92
Bethany	College	psychology	B.A.	81
V.C.S.C	54+ Fin	vance	CER	97
Golden Ga	KU. FIA	unce	M.A.	IN PROGRESS

WORKFORCE INVESTMENT BOARD - APPLICATION SUPPLEMENT

Name:	•	Louis J. Tuosto	Date:	05. 17.02					
		e the information requested below as it relates to vestment Board (WIB) nomination you are seeking		of the					
Workfo	orce In	vestment Board areas for nominations - Please che	eck one box:						
2. 3. 4. 5. 6. 7. 8. 9.	Business (Private Sector/Non-Governmental) [] Employment Development Department [] Economic Development Agency [] Community Services Block Grant [] Title V of the Older Americans Grant [] Migrant and Seasonal Farmworker Programs [] Representatives from Local Jurisdictions [] Vocational Rehabilitation [] Organized Labor [] Community Based Organization [] Economic Development Agency [] Public Assistance Agency (Welfare to Work, CalWORKs) [] Education Adult Education Post-Secondary Education I Circle One								
If you question	on 15.	is the name of your business?		(
	Tuosto Insurance & Financiac Name of Business								
	(a)	Are you the Chief Executive or Owner	Yes	No					
	(b)	Are you the Chief Operating Officer	Yes	No					
	(c)	Do you have substantial management or policy responsibility	Yes	No					
(If you Superv		ered no to a, b, and c your application cannot be	considered b	_					
Superv	(d)	Number of employees at the Santa Cruz County	facility						
	(e)	Is the business minority owned or operated	Yes	No					
	(f)	Please check the box indicating which Chamber you: [] Aptos [] San Lorenzo Valley [] Scotts Valley [] Pajaro Valley	[1 Cap	itola ta Cruz					

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

Tyoto Ansurance & Financial.
Organization Name

WORK/VOLUNTEER EXPERIENCE

<u>Organization</u>	,	<u>dress</u>	<u>Position</u>	Year
Capitola-Soovel	little legg	ue	Соден	94-98
G.A.LS of Cropil			Coacel	93-96
Captul soquel	•	•	Pacul / Muga	94-97
Slecon & Dehak				97-99
Monk Vista flig	h Schud	Sub-tracky	Parttime	95-97

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 the appointment.

CERTIFICATION

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

25. (7.02 Date

For Private Sector Representatives Only:

Single Slate Nominee of local Santa Cruz County General business organization

Tuesto lusura a i Fimmina

Nominating Organization

Authorzing Signature

05.17-02

Date

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