Print

Application for Appointment to Board,	Commission,	Committee,	Task Force	or Position -
Submission #605				

Date Submitted: 11/15/2018

Applicants appointed by the Board of Supervisors will be required to take an oath of office. All applications will be kept on file for one year from the date of application.

Public Records Act

Applications are public records that are subject to disclosure under the California Public Records Act. Information provided by the applicant is not regarded as confidential except for the addresses and phone numbers of references and the applicant's personal information including home and work addresses, phone numbers and email address.

Form 700 Conflict of Interest Code

California Fair Political Practices Website

Please note that appointees may be required by state law and county conflict of interest code to file financial disclosure statements.

Application for Appointment to:

Napa County Child Care Planning Council

Name of Board, Commission, Committee, Task Force or Position.

Category of Membership for Which You Are Applying*

Public Agency

This information can be found on the news release announcing the opening. You may apply for more than one category if more than one position is open.

Personal Information

The following information is provided in confidence, but may be used by the Board of Supervisors when making the appointment, or be used by the Committee/Commission/Board/Task Force following appointment for purposes of communicating with the appointee.

Full Name*	Supervisorial District in	Which You Reside*		
Ms. Amalia Kulczycki	Napa District 3 bf			
Home Address*				
City* St Helena	State*	Zip*		
Citiona		34074		
Phone*	Email Address*			
Work Address*				
City*	State*	Zip*		
St Helena	CA	94574		
Work Phone*				
Current Occupation*				
Recreation Supervisor for the City of St.	Helena			
Trees eation oupervisor for the Oily Of St.	Ποιοπα			

Within the last 12 months

Current License	
Professional or occupational, date of issue, and expiration inclu	uding status
Education/Experience	
BS in Hotel Management w/ minor in Leisure Services; MS in	Sports & Leisure Management (Recreation)
Resume	
	Browse
Attach a resume containing this and any other information that application.	would be helpful to the Board in evaluating your
Community Participation	
Active member of the Napa Moms Group	
Nature of activity and community location	
Other County Board/Commission/Committee on Which You Ser	ve/Have Served
Programming Committee member for Rianda House Senior A	ctivity Center
Public Actions that may impact Credit Rating	
n/a	
List all court or other public administration actions impacting yo	ur credit rating within the past ten (10) years.
Provide names, addresses and phone numbers of 3 individuals	s who are familiar with your background.
Defenence 1	
Reference 1	
Name*	Phone*
Julie Spencer,	

Address*			
City*	State*	Zip*	
St. Helena	CA	94574	
•••••		••••••	••••••
Reference 2			
Name*	Dhonet		
Michelle Dahlberg,	Phone*		
Wildlelie Dariberg,			
A.11			
Address*			
City*	State*	Zip*	
Napa	CA	94558	
'			
Reference 3			
Reference 5			
Name*	Phone*		
Andre Pichly			
Address*			
İ			

Please explain your reasons for wishing to serve and, in your opinion, how you feel you could contribute.* I am personally and professionally invested in the child care options in the Napa Valley; I represent the interests of parents with toddlers, youth program providers, and Upvalley individuals. I live in Napa and have a two year son. I work full time for the St. Helena Recreation Department running community recreation programs, including the affers-school enrichment for St Primary & Elementary, youth summer camps, and a large martial arts program. I ran the St. Helena Teen Center middle school after-school program for 3 years prior to the discontinuation of the program earlier this year. Responded Yes I declare under penalty of perjury that the foregoing is true and correct.* Yes No Electronic Signature Agreement By checking the "I agree" box below, you agree and acknowledge that 1) your application will not be signed in the sense of a traditional paper document, 2) by signing in this alternate manner, you authorize your electronic signature to be valid and binding upon you to the same force and effect as a handwritten signature, and 3) you may still be required to provide a traditional signature at a later date. 1 agree.	City*	State*	Zip*	
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