

County Executive Office 1195 Third Street, Room 310 Napa, CA 94559-3082 (707) 253-4421 FAX (707) 253-4176 APPLICATION FOR APPOINTMENT TO BOARD, COMMISSION, COMMITTEE OR TASK FORCE

RECENTED

DEC 15 2014

BAFA

COUNTY OF NAPA EXECUTIVE OFFICE

PLEASE TYPE OR PRINT (Complete pages 1 through 3)

ROTE: 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 from and work addresses, phone numbers and email address.

PLEASE NOTE THAT APPOINTEES MAY SE REQUIRED BY STATE LAW AND COUNTY CONFLICT OF INTEREST CODE TO FILE FINANCIAL DISCLOSURE STATEMENTS.

For information about Form 700 Confect of Interest Code attck on this tak <u>Controlline Liet of Form 700 Fillers</u>

*Application for Appointment to: (Name of Board, Commission, Com	mittee or Task Force)
Napa County Fo	od Advisory Council
*Category of membership for which you are applying: (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.)	*Supervisorial District in which you reside:
Local Food Advisory Counc	American Canyon 5
*Full Name:	*Date:
Will Clayton	12/15/2014
*Current Occupation: (within the last twelve (12) months)	
Retired	
*Current License: (Professional or Occupational, date of issue and/o	or expiration including status)
Licensed Vocational Nurse	
*Education/Experience: (A resume may be attached containing this and any other	er information that would be helpful to the Board in evaluating your application.)
HS. US ARMY, Labor Movement	
*Community Participation: (Nature of activity and community location	n)
*Other County Board/Commission/Committee on which you serve/h	ave served:
n/a	

*Application for Appointment to: (Nam	e of Board	I, Commission, C	Committee	or Task Force)			
Napa County Food Advisory Counc	il						
Names, addresses and phone numbe	r of three (3) individuals far	amiliar with y	our background:			
*Name:			,	*Name:			
Evelyn Gray			Nicolas Yuille				
*Address:		:	*Address:				
*City:	*State:	*Zip Code:		*City:		*State:	*Zip Code:
Clute	Tx	77531		Southfield		MI	48034
*Telephone:				*Telephone:			
							•
*Name: Beverly White *Address:							
*City:	*State:	*Zip Code:					
Indio	Ca	92200					
*Telephone:							
Name and occupation of spouse with	in the last	12 months, if ma	arried (For (Conflict of Interest purpos	es):		
N/a							
*Please explain your reasons for wish	ning to serv	∕e and, in your o	opinion, hov	you feel you could contr	ibute:		
Involvement in my community. Ma sidelines and have a voice.	ake a cont	ribution/provid	de my input	for the good of the peo	ple where I	live. Stop	sitting on the

*Application for Appointment to: (Name of Board, Commission, Committee or Task Force)

Napa County Food Advisory Council

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.

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:			*email Address:			
Will Clayton						
*Home Address:			*Work Address:			
			n/a			
*City:	*State:	*Zip Code:	*City:	*(State:	*Zip Code:
American Canyon	CA	94503	n/a		n/	94503
*Telephone:			*Telephone:			

Will Clayton

American Canyon, California 94503

Objective

To secure a leadership position consulting with diverse groups of people to work together for common goals. A position that allows me to utilize my skills and experience in Management, Consulting and Staff/Team Development.

Professional Achievements

Leadership

- Managed a division of 20 staff and 22,000 union members
- Managed a 4 million dollar division (department) budget
- Developed and maintained relationships with Management Leaders, Staff Leaders, Community Leaders and Union Members, Union Leaders and Peers
- · Staff and Union Member leadership Development

Assistant to the President of the Union

- · Liaison with Coalition Leaders to the President
- Coordinated and organized training for Union members outside our organization
- Represented the President on the Board of Directors of Healthcare Career Advancement Program (HCAP)
- National Diversity Committee (Coalition of Unions and Kaiser Permanente)
- Community Benefit Program Northern California Region

Career Mobility of Incumbent Workers

- Board Member of SEIU-UHW Education Trust Fund
- · Represented the Union on the Planning Committee of the Trust Fund
- Provided leadership to redeployment initiatives

Elected Administrative Vice President 2002 - Present

Skills

- Excellent People Skills
- · Excellent Telephone Skills
- Motivational Skills
- Interest Based Problem Solving Technique
- General Computer Skills

Work History

Assistant to the President/	SEIU-United Healthcare Workers West Union	11/1993 - Present
Director of National Projects		This assignment (3/2005 Present)
Kaiser Division Director	SEIU-United Healthcare Workers West Uniion	11/2000 – 3/ 2005
Kaiser Division Asst. Director	SEIU-United Healthcare Workers West Uniion	6/1997- 11/2000
Field Representative /Lead Field Rep	SEIU-United Healthcare Workers West Uniion	11/1993 – 6/2000

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Will Clayton

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Licensed Vocational Nursing Kaiser Permanente Medical Center - Oakland 10/1988 - 6/95

References

References are available on request.

Your Name

Address, phone, fax, email