



County Executive Office
1195 Third Street, Room 310
Napa, CA 94559-3082
(707) 253-4421 FAX (707) 253-4176

eAFA

APPLICATION FOR APPOINTMENT TO BOARD, COMMISSION, COMMITTEE OR TASK FORCE

PLEASE TYPE OR PRINT (Complete pages 1 through 3)

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

Commission on Aging

*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.)*

community member

*Supervisorial District in which you reside:

one

*Full Name

suzanne shiff

Date

6/29/2006

*Current Occupation (within the last twelve (12) months):

Public Authority Director. In Home Support Services

Current License (Professional or Occupational); Date of issue and/or expiration including status:

Empty text box for license information.

Education/Experience: *(A resume may be attached containing this and any other information that would be helpful to the Board in evaluating your application.)*

**MA, Psychology -- Organization Development - Sonoma State University 2001
BA, Recreation Therapy/Administration - Sacramento State University 1981**

**Executive Director Public Authority IHSS, County of Napa January 2003-June 30,2006
Program Administator, Volunteer Director, Recreation Therapist - Napa State Hospital,
1975-1983, 1986-2001**

Community participation (nature of activity and community location):

**Graduate Leadership Napa Valley 1990; Practicum Consultant LNV - 2001 - current;
Member Congrgation Beth Sholom - Past President; Associate member - Napa Non-
profit coalition; Member Napa Noon Rotary Club; Member State and National
Organization Development Professional Groups, Member, California Association of
Public Authorities**

Other County Board/Commission/Committee on which you serve/have served:

Ad Hoc member Commission on Aging, Member Healthy Aging Steering Committee

* Denotes Mandatory Entry Required

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Names, addresses and phone numbers of three (3) individuals familiar with your background:

*Name

Chuck Castellar

*Name

Betsy Strauss

*Address

*Address

*City

*State *Zip Code

*City

*State *Zip Code

*Telephone

*Telephone

*Name

Jill Techel, Mayor

*Address

*City

*State *Zip Code

*Telephone

Name and occupation of spouse within the last 12 months, if married (for Conflict of Interest purposes):

NA

*Please explain your reasons for wishing to serve and, in your opinion, how you feel you could contribute:

As I leave my current official position with Public Authority In Home Support Services, I have enjoyed working as a member of the two COA ad hoc groups and realized that just because I am leaving --I do not have to give up my connection to the population I have served. I want to continue my work and involvement with seniors and capacity building of the related issues in the County of Napa. I have had first hand experience with the COA for the past 3 years and many other stakeholder groups locally and statewide.

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APPLICANTS APPOINTED BY THE BOARD OF SUPERVISORS WILL BE REQUIRED TO TAKE AN OATH OF OFFICE.

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

All applications will be kept on file for one year from the date of application

PERSONAL INFORMATION

The following information is provided in confidence to the extent that it will not be posted on the Internet, 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

suzanne shiff

*e-mail Address

*Home Address

*Work Address

*City

State

*Zip Code

*City

State

Zip Code

*Telephone

Telephone

Please Read!

Miller, Pamela

From: Seniors [seniors@volunteernapa.org]
Sent: Friday, July 07, 2006 11:02 AM
To: Miller, Pamela
Cc: ssshiff@co.napa.ca.us
Subject: Suzanne Shiff/Commision on Aging

It is exciting for me to think of Suzanne Shiff serving as a member of the Commision on Aging of Napa County. Suzanne is keenly aware of the issues seniors face and she is not only empathic and caring, but eager to address these issues. Suzanne is a born problem solver, and with her high energy and strong desire to improve the quality of life for our seniors in our community, she would be an outstanding addition to the Commision.

Pat Anderson
Program Manager
Senior Services