

Application Form for Disability Rights California Board of Directors and Board Committee Public Members

If you would like to serve on Disability Rights California's Board of Directors or Board Committees as a Public Member, please complete this application form or send a letter with all of the following information to:

**Cathy Harton
Disability Rights California
100 Howe Avenue, Suite 185N
Sacramento, CA 95825
Phone: 916/488-9955
Fax: 916/488-9962**

Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Email: _____

PHONE: _____ **OCCUPATION:** _____

Date of Application: _____

6. Describe your experience advocating for people with disabilities or others.

7. Discuss your leadership or policy development experience.

8. Are you a member of other disability or civil right organizations? If so, please identify those groups below.

9. Discuss your experience in fundraising.

10. For PAIMI Advisory Council applications, discuss your experience working on issues of importance to mental health consumers.

Disability Rights California's Board values diversity. In order to assist the Board in selecting diverse Board members, please identify which of the following group(s) you belong to:

- African American
- Asian/Pacific Islander
- Hispanic/Latino
- Native American
- White
- Multi-racial
- Decline to State
- Developmental Disability
- Psychiatric Disability
- Learning Disability
- Sensory Disability
- Physical Disability
- Other Disability

Please Specify: _____

- Gay, Lesbian, Bisexual or Transgender
- Other: _____
- Decline to State

No applicant will be granted or denied a seat on Disability Rights California's Board of Directors based solely upon his/her response to these questions.