

**APPLICATION  
FOR  
MEMBERSHIP TO  
COLUSA-GLENN-TRINITY  
COMMUNITY ACTION PARTNERSHIP  
BOARD OF DIRECTORS**

Under the provisions of Senate Bill No. 161 and the California Community Services Block Grant Program, the Boards of Supervisors for Colusa-Glenn-Trinity Counties have designated Glenn County Community Services as a Community Action Agency administering Community Service Block Grant funds for the three counties under a Joint Powers Agreement. A Tri-Partite Board made up of members from each of the counties in three sectors (Public, Private and Economically Disadvantaged) is required.

The Colusa-Glenn-Trinity Community Action Partnership Board of Directors meets for business 4 times per year. The Board is divided into 3 committees, one for each county represented. Each committee meets as needed for business and several times for Public Hearings throughout the year. Among the duties of a Director is to determine the Colusa-Glenn-Trinity Community Action Agency's major organizational, fiscal and program policies, and to oversee the extent and quality of the participation of the low-income in the programs of the Community Action Agency.

In the event of an opening on the Board, please indicate your interest in serving a three-year term in one of the following categories (circle the categories you can represent):

CATEGORY I – Elected public officials, currently holding office

CATEGORY II – Category II, Representing Economically Disadvantaged

CATEGORY III – Officials or members of business, industry, labor, religious, welfare, education or other major groups and interest in the community

\_\_\_\_\_  
NAME

\_\_\_\_\_  
DATE

\_\_\_\_\_  
COUNTY OF RESIDENCE

\_\_\_\_\_  
BUSINESS PHONE NUMBER

\_\_\_\_\_  
MAILING ADDRESS

\_\_\_\_\_  
HOME PHONE NUMBER

Tell us why you are interested in becoming a member of the Colusa-Glenn-Trinity Community Action Agency:

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Please list any current or previous volunteer and/or community work you are involved with (include any organizations you represent):

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Please list three Community/ Neighborhood references:

_____ Name	_____ Address / Phone
_____ Name	_____ Address / Phone
_____ Name	_____ Address / Phone

\_\_\_\_\_  
SIGNATURE

Return to: Kathryn McDaniel  
Glenn County Community Action Department  
125 E Walker Street  
Orland, CA 95963