



San Luis Obispo County Early Care and Education Planning Council Membership Application

Mission Statement: The San Luis Obispo County Early Care & Education Planning Council, serves as an advisory body to the County Superintendent of Schools and County Board of Supervisors. We, in partnership with families and the community, plans for and promotes the highest quality and accessible services for the care of all children and youth ages 0-12.

Functions and Responsibilities: The Council is a legislatively mandated body that conducts research and analysis, makes recommendations on California Department of Education funding, and coordinates countywide projects to assist the development of child care and youth programs throughout San Luis Obispo County.

The Council is comprised of a voting membership of up to 30 individuals, representing the categories listed below. Members are appointed jointly by the County Board of Supervisors and County Superintendent of Schools to serve a two-year term.

1. **Consumers:** Parents or persons who receive, or have received child care services within the past 36 months.
2. **Child Care Provider:** A Child Care Provider is an individual who provides child care services or represents those who provide child care services.
3. **Public Agency Representative:** A Public Agency Representative is an individual who represents a city, county, city and county or local education agency and who funds, regulates or monitors the delivery of child care services.
4. **Community Representative:** A Community Representative is an individual representing an agency or businesses providing private funding for child care services, or advocating for child care services through participation in civic or community-based organizations. This category excludes child care providers and individuals representing an agency contracting with CDE to provide child care and development services.
5. **Discretionary:** Persons who are appointed from any of the four categories listed at the discretion of the appointing agencies.

Membership Duties:

1. Participation in an orientation and/or retreat each year;
2. Attendance at a minimum of 50% of the Council meetings per year;
3. Active participation in at least one committee;
4. Thoughtful and consistent response to the concerns of the BOS, SLOCOE, Planning Council staff and members, parents, child care providers and the general public.

Membership Requirements:

1. Must support the mission and goals of the Council.
2. Cannot have been convicted of a felony or any crimes against a child. If charges are filed during term of membership, membership will be suspended until the issue is resolved.
3. If membership in an organization or employment is used on Council application as criteria for appointment to the council, the member must inform the membership committee of any change of status in employment or membership in order to maintain council diversity.
4. Follow the Brown Act, all Council Bylaws, Application and Membership Agreements.

The application process is as follows:

1. Applicants must complete and submit:
 - San Luis Obispo County Early Care & Education Planning Council Membership Application
 - Application for Appointment to a SLO County Board of Supervisors Board, Commission or Committee
 - Application Statement

Send Completed Applications to:

San Luis Obispo County Early Care & Education Planning Council
Attn: Raechelle Bowlay
3350 Education Drive, San Luis Obispo, CA 93405
council@sanlusichildcare.org

2. The membership committee will review applications, conduct a professional reference check, Megan's Law background check before forwarding recommended candidates to the Council.
3. Candidates are encouraged to attend Council meetings.
4. Applications approved by the Council will be forwarded to the County Superintendent of Schools and the Board of Supervisors. Forwarded applicants are not guaranteed appointment.
5. New Council members will be notified of their appointment in December.
6. Appointments are effective January 1st.

Applicants for the San Luis Obispo County Child Care Planning Council must live or work in San Luis Obispo County and exhibit:

- A strong commitment to advocating for increased quality child care services
- An ability to make information-based decisions;
- Excellent leadership skills.

Name: _____

Address: _____

Agency/Business: _____

Phone: _____ Fax: _____ E-Mail: _____

Check ALL categories under which you are applying for nomination:

- Child Care Consumer Child Care Provider
- Public Agency Representative Community Representative
- Discretionary

Appointments to the Council are made available to individuals, not organizations. Based on the definitions on the preceding page, please explain why you marked the category above.

Please provide two professional references, you feel comfortable being contacted.

Name: _____ Title: _____

Phone: _____ Email: _____

Name: _____ Title: _____

Phone: _____ Email: _____

Every effort is made to ensure that the ethnic, racial and geographic composition of the Council is reflective of the diversity of the population of our county. Please complete the following:

In what part of the county do you work? North South SLO Coast

In what part of the county do you live? North South SLO Coast

Gender: Female Male

Ethnic Origin: African-American Hispanic Asian-American/Pacific Islander
 Native American White Other: _____

APPLICATION STATEMENT:

On a separate page, please explain in your own words your qualifications. Describe your community, professional, or personal experiences that enable you to provide leadership and work collaboratively with diverse groups of people. Please list specific contributions you would make to the work of the Council.

I understand that this application will be processed as described, and does not guarantee me a position on the Council. I also understand that if any member or prospective member does not meet the terms of the application and/or membership agreement at the time of appointment or during the term of appointment to the Council, then the Membership Committee may recommend to the appointing authority (BOS, SLOCOE) that the member be removed or that a prospective member not be appointed.

Signature: _____ Date: _____

**APPLICATION FOR APPOINTMENT TO A
SAN LUIS OBISPO COUNTY BOARD OF SUPERVISORS
BOARD, COMMISSION OR COMMITTEE**

Date _____

Applying for appointment to: **San Luis Obispo County Early Care & Education Care Planning Council**
(Name of Board, Commission or Committee)

Name _____

Address _____

Business Phone _____ Home Phone _____

Fax _____ Email Address _____

Supervisorial District _____ Years resided in County _____

If retired, Past Occupation/Employer

Education

List work experience, training, volunteer activities, skills that relate to your qualifications

List dates/names of positions you have held on any advisory body or elected office

List Membership to Organizations

Please explain why you would like to serve in this capacity

If appointed, are you willing to participate in the majority of meetings each year, and if necessary in numerous related meetings or subcommittees?

YES NO _____ COMMENTS

If appointed, are you willing, if required, to file a Statement of Disclosure as a Public Official Under the standards of the Fair Political Practice Commission?

YES NO _____ COMMENTS

If appointed, do you want to have your address or telephone number(s) published?

YES NO _____ COMMENTS