



CITY OF SANTA BARBARA
PARKS AND RECREATION DEPARTMENT

Application for Appointment to

Advisory Committee

(City employees are not eligible to serve on the Advisory Committee)

APPOINTMENT

RE-APPOINTMENT

Name: Charles Jefferson

Home Address/City/Zip Code: 6069 Shirvell way Apt D, Goleta, 9311

Business Address/City/Zip Code: _____

Home Telephone Number: 967-3643 Business Phone Number: 284-1034

Facsimile Number: _____ E-mail Address: chucky8667@yahoo.com

Who will you represent? (e.g. community at large, an organization, neighbor, etc.)

community at large

EXPERIENCE/BACKGROUND

Education: High school

Present Occupation/Position Title: UCP/WORK, Inc., employee, & served by UCP/W

Memberships in Organizations: Poetry.com,

If appointed as an Advisory Committee member, please share what expertise you will offer the Committee:

- I know people who participate in the activities & events.
- Strong network of people with disabilities who might want to do the activities.
- honest feedback, articulate.

Have you served on this committee or any City Committee in the past? Yes No

If so, please identify the Committee and the dates you served:

Oxnard & Thousand Oaks early 1980s
Advocacy for people with disabilities