



**INTEREST SURVEY
FOR THOSE DESIRING TO SERVE ON THE
STANISLAUS COUNTY
ADVISORY BOARD ON SUBSTANCE ABUSE PROGRAMS**

ALL APPOINTMENTS ARE MADE BY THE
STANISLAUS COUNTY BOARD OF SUPERVISORS

Please type or print

NAME _____
First Middle Last

ADDRESS _____
Street Address

_____ City State Zip Code

TELEPHONE _____
Home Phone Work Phone

E-MAIL ADDRESS _____

1. What Supervisorial District do you live in? _____
(See attached map for alignment of Districts)
2. Are you a full-time or part-time employee of Behavioral Health and Recovery Services, an employee or member of a board of directors or advisory board of a County-operated alcohol or drug program, including community agencies which have a contract with the Stanislaus County Behavioral Health and Recovery Services, or a member of an advisory board to a Drinking Driver Program?

Yes _____ No _____

Please explain:

3. How many hours could you devote each month to carrying out the duties of an Advisory Board on Substance Abuse Programs member?

_____ hours per month

4. What is your professional, work or volunteer background?
(Please attach additional sheets if necessary.)

5. Education (high school, college, trade school, or training).
Note: There is no specific educational requirement.

6. Do you have any special areas of interest in substance abuse services? If so,
please describe below. (Please attach additional sheets if necessary.)

7. What specific things would you like to accomplish as a member of the Advisory
Board on Substance Abuse Programs? (Please attach additional sheets if necessary.)

8. What substance abuse or related interest groups/advisory groups/governing
boards or organizations do you currently belong to? (Please attach additional sheets if
necessary.)

A resume containing other pertinent information about yourself would be helpful to Board members in evaluating your application.

Signature

Date

Please return Interest Survey to:

Stanislaus County Advisory Board on Substance Abuse Programs
800 Scenic Drive
Modesto, CA 95350
(209) 525-6225
Fax (209) 558-4326

Please list three references with telephone numbers and attach.