

Subject: Online Form Submittal: Advisory Group Application
Date: Monday, January 1, 2024 1:44:33 PM

Advisory Group Application

Step 1

Application for Appointment to Whatcom County Advisory Groups

Public Statement

THIS IS A PUBLIC DOCUMENT: As a candidate for a public advisory group, the information provided will be available to the County Council, County Executive, and the public. All advisory group members are expected to be fair, impartial, and respectful of the public, County staff, and each other. Failure to abide by these expectations may result in revocation of appointment and removal from the appointive position.

Title	Mrs.
First Name	ava
Last Name	Sakowski
Today's Date	1/1/2024
Street Address	████████████████████
City	████████████████
Zip	████
Do you live in Whatcom County?	Yes
Do you have a different mailing address?	<i>Field not completed.</i>
Primary Telephone	██████████
Secondary Telephone	<i>Field not completed.</i>
Email Address	████████████████████

Step 2

1. Name of Advisory Incarceration Prevention and Reduction Task Force/Law &

Group	Justice Council
Incarceration Prevention and Reduction Task Force Position:	Consumer, or family member of a consumer, of behavioral health services
2. Do you meet the residency, employment, and/or affiliation requirements of the position for which you're applying?	Yes
3. Which Council district do you live in?	District 5
4. Have you ever been a member of this Advisory Group	No
5. Do you or your spouse have a financial interest in or are you an employee or officer of any business or agency that does business with Whatcom County?	No
6. Have you declared candidacy (as defined by RCW 42.17A.055) for a paid elected office in any jurisdiction within the county?	No
You may attach a resume or detailed summary of experience, qualifications, & interest in response to the following questions	<i>Field not completed.</i>
7. Please describe your occupation (or former occupation if retired), qualifications,	I am currently a marketing professional that owns a small consulting firm in a former life beginning in the mid -seventies, I was a part of a peer counseling program that lead to a 25 year career in substance abuse related counseling services in five

professional and/or community activities, and education

states. I worked with people in recovery throughout that time and with clients that were moving from incarceration to half-way housing. I was a part of a time when social services were available to individuals and families, we worked hand in hand with the police, local hospitals, and schools in gang prevention, youth services, family services etc. There was a huge cooperative network. I think I would be a good resource for services that work.

8. Please describe why you're interested in serving on this Advisory Group.

I believe I could have positive impact on helping identifying after incarceration services in prevention services that take the stress away from local police and offer alternatives.

References (please include daytime telephone number):

Debbie David - 360-961-7325
Mel Hoover 304-395-4359

Appointment Requirements

I understand and agree

Signature of applicant:

Ava Sakowski

Place Signed / Submitted



(Section Break)