

Subject: Online Form Submittal: Advisory Group Application
Date: Friday, November 22, 2024 2:15:35 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	Field not completed.
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First Name	Lyn
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Last Name	Salazar
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Today's Date	11/22/2024
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Street Address	
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City	
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Zip	
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Do you live in Whatcom County?	Yes
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Do you have a different mailing address?	Field not completed.
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Primary Telephone	
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Secondary Telephone	Field not completed.
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Email Address	
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Step 2

1. Name of Advisory	Child & Family Well-Being Task Force
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Group

Child & Family Well-Being Task Force

Yes

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 2

4. Have you ever been a member of this Advisory Group

Yes

If yes, please list dates:

2024

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

Field not completed.

7. Please describe your occupation (or former occupation if retired), qualifications,

Former international teacher, current substitute teacher and para educator

Volunteer with Bellingham Queer Collective

professional and/or
community activities,
and education

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

I advocated for the passage of Prop 5. I have a lifetime interest in the wellbeing of children and families. I am semi retired and want to volunteer my time to helping my community.

References (please
include daytime
telephone number):

Field not completed.

Appointment
Requirements

I understand and agree

Signature of applicant:

Lyn Salazar

Place Signed /
Submitted



(Section Break)