

APPLICATION FOR A SANTA CLARA VALLEY WATER DISTRICT COMMITTEE

Please complete this application in its entirety and submit an original signed copy to the Office of the Clerk of the Board at 5750 Almaden Expressway, San Jose, California 95118. If more space is needed, please attach additional pages. Applications are valid for one year from the date of receipt and are public record. This application is available on-line at www.valleywater.org under "Board of Directors." For assistance, please contact the Office of the Clerk of the Board at (408) 265-2607, extension 2277.

CONTACT INFORMATION A.

Name of Committee: Agricultural Committee Name (First, Middle, Last): Erin H Gil				
Mailing Address: (Street Address, City, State, ZIP)				
E-mail: Erin@grassfarmi	nc.com			
If Applicable, Present Employer (Name and Address): William Y. Gil, Inc		Job Title: President		
	tractual relationship with the smore space is needed, please	Santa Clara Valley Water District? e attach additional pages):	☐ Yes ⊠ No	
R VOLUNTEED EY	DEDIENCE			

JLUN I EEK EXPERIENCE

List current and previous volunteer experience. Include experience with charitable organizations, committees and commissions, or public offices you may have held and relevant dates. If more space is needed, please attach additional pages. DATE(S): NAME: RESPONSIBILITIES/EXPERIENCE: Committee Member 1990's Valley Water LAC Committee Member Board Chair 2000's Valley Water LAC SCCFB Board member 2013's **SCCFB** Board member / president 2020's CAC 2023 Open Space Authority

C. INTEREST AND AVAILABILITY

11				
How did you hear about this committee opening?				
☐ District Website	Director (please specify): John Varela			
Committee Member (please specify): Russ Bonino	Other (please specify):			
Please describe your interest in serving on this committee: Protect Agricutural waters				
Please describe your relevant qualifications, such as specific sapplying for this committee: Please see past experience	skills, training, or knowledge that should be considered in			
How would the community benefit by your participation on this A voice for practical policies will be voiced.	committee?			
Are you available to attend committee meetings when scheduled? (please go to www.valleywater.org for committee meeting schedule details) Yes No If No, please describe:				
If you have a disability, what accommodations would you need to serve on this committee? No				
D. EMERGENCY CONTACT INFORMATION				
In case of emergency, contact:				
• • • • • • • • • • • • • • • • • • • •				
1. Name:	Phone: -			
	Phone:			
1. Name:	Phone: RUE TO THE BEST OF MY KNOWLEDGE AND MAY BE T. I UNDERSTAND THAT MISREPRESENTATION OR			