



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.

A. CONTACT INFORMATION

Name of Committee: Safe Clean Water Independent Monitoring Committee			
Name (First, Middle, Last): Erika Laguna			
Home Phone:	Work Phone:	Cell Phone:	Fax:
Mailing Address: (Street Address, City, State, ZIP)			
E-mail:			
If Applicable, Present Employer (Name and Address): Downtown Streets Team 1671 The Alameda #301, San Jose CA 95110		Job Title: Director of Santa Clara and San Mateo Counties	
Do you have a current contractual relationship with the Santa Clara Valley Water District? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, please describe (if more space is needed, please attach additional pages): Downtown Streets Team is contracted with Valley Water for work being done at Penitencia Creek doing debris clean up and outreach to the unhoused community and is a subcontractor for work being conducted at Guadalupe River Park working with Guadalupe River Park Conservancy.			

B. VOLUNTEER 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:
2017-2019	Downtown Streets Team	Prior to being an employee of DST I was a volunteer donating my notary services to help serve the unhoused community.
2001-Current	National Notary Association	Currently a Notary for the State of California

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C. INTEREST AND AVAILABILITY

How did you hear about this committee opening?	
<input type="checkbox"/> District Website	<input type="checkbox"/> Director (please specify):
<input type="checkbox"/> Committee Member (please specify):	<input checked="" type="checkbox"/> Other (please specify): Shiloh Ballard
Please describe your interest in serving on this committee: I was born and raised in San Jose and lived most of my life near the Guadalupe River, I have always been interested in how all the waterways in the area are maintained and how to support and educate the community on the impact they can make to sustain our county water sources. I am interested in learning about the grants and measures in place and what each of their outcomes is expected to be.	
Please describe your relevant qualifications, such as specific skills, training, or knowledge that should be considered in applying for this committee: I have been working at Downtown Streets Team (DST), a local nonprofit for the past 6 years. In that time DST that has been working in connection with Valley Water for most of that time. I have been responsible for submitting the contract request, overseeing the deliverables, reporting and budget for the grants. I have been boots on the ground working alongside our volunteers along the waterways at the Guadalupe River and Penitencia Creeks collecting debris and doing outreach to the unhoused community.	
How would the community benefit by your participation on this committee? If I was selected to participate in this committee I would bring my knowledge and experience working with the unhoused population and the ability to do outreach to the unhoused or other service providers. I am also bilingual in Spanish and a Notary and would be happy to assist if needed.	
Are you available to attend committee meetings when scheduled? (please go to www.valleywater.org for committee meeting schedule details) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, please describe:	
If you have a disability, what accommodations would you need to serve on this committee? NA	

D. EMERGENCY CONTACT INFORMATION

In case of emergency, contact:	
1. Name:	Phone:
2. Name:	Phone:

I, HEREBY, ATTEST THAT THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND MAY BE VERIFIED BY THE SANTA CLARA VALLEY WATER DISTRICT. I UNDERSTAND THAT MISREPRESENTATION OR OMISSIONS MAY BE CAUSE FOR MY IMMEDIATE REJECTION AS AN APPLICANT OR TERMINATION FROM APPOINTMENT TO A COMMITTEE.



Applicant Signature

7/2/25

Date Signed