



## Commission Member/Advisory Committee Application Form

The Riverside County Children and Families Commission, also known as First 5 Riverside County (F5RC) is dedicated to helping Riverside County's youngest children develop a strong foundation for success in school and throughout their lives. Our mission is to invest in partnerships that deliver results in these areas: physical health, social emotional health, cognitive development, as stable home environment and schools that are ready. For more information visit [www.rccfc.org](http://www.rccfc.org)

The legislation implementing Proposition 10, which created First 5 Commissions in each of the State's 58 Counties, establishes specific criteria for commission membership. The Riverside County Board of Supervisors has, consistent with State legislation, established F5RC as its own County Department and created the opportunity for individuals to apply to fill six Commissioner and 10 Advisory Committee positions.

**Indicate the category or categories under which you are applying (Required):**

- Recipient of First 5 Riverside Project Services in the Commission Strategic Plan (see attached)
- Educator specializing in early childhood development

**Or Representative of the following:**

- A local child care resource or referral agency or local child care coordinating group
- A local organization for prevention or early intervention for families at risk
- A community based organization with the goal of promoting nurturing early childhood Development
- A local school district
- A local medical, pediatric, or obstetric association or society

Please indicate the Riverside County Supervisorial District in which you live and/or work:

- District 1     District 2     District 3     District 4     District 5

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Number/Street                      City                      State                      County                      Zip

**1. Relative Experience/Employment (Attach a resume if applicable):**

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**2. Areas of expertise/contributions you can make:**

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**3. Why are you interested in serving on this committee?**

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**List other volunteer/board/Committee/employment commitments:  
(Attach an additional sheet to complete this application if necessary)**

Name of Organization	Your Relationship	Potential Conflict of Interest if appointed to this commission? Yes/No If yes, explain

Signature \_\_\_\_\_

**For Internal Use Only**

Executive Director/Department Head Recommendation to Board of Supervisors

Recommend Appointment                       Do not recommend appointment

Comments: \_\_\_\_\_  
\_\_\_\_\_

Action taken by Board of Supervisors:  Recommended/ Appointed \_\_\_\_\_  
Date/BOS Agenda Ref.

Declined Appointment \_\_\_\_\_ (Date Recipient Notified)