

**SAN LUIS OBISPO COUNTY COMMISSION ON AGING**

The Commission is an advisory body to the County Board of Supervisors. The Commission consists of 17 members. Members should have background in working with Seniors or be a Senior who represents the interests of the Senior population.

Date: \_\_\_\_\_

**APPLICATION FOR MEMBERSHIP ON COMMISSION**  
(See list of Commissioner's Duties on page two)

Name (please print): \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Age: 50-60  61-70  71 +

Education: \_\_\_\_\_ Occupation: \_\_\_\_\_

Are you a U.S. citizen or legal resident? \_\_\_\_\_

Organization Memberships/Appointments/Activities that you have participated in on behalf of the Senior Community: \_\_\_\_\_

In your opinion, what are special concerns facing Seniors in our community that you would most like to follow? \_\_\_\_\_

**Are you able to commit to regular monthly meetings?** \_\_\_\_\_

What would you like to accomplish on behalf of our Senior population as a member of the Commission on Aging? \_\_\_\_\_

Which of these would you be willing to do outside of the meeting?

- 1) Work on task forces \_\_\_\_\_
- 2) Outreach/Advertising \_\_\_\_\_
- 3) Visit Senior Centers \_\_\_\_\_
- 4) Attend Board of Supervisor meetings \_\_\_\_\_
- 5) Represent the Commission at functions \_\_\_\_\_

**Please add other information you would like the Nominating Committee to consider.** Potential new members are encouraged to attend at least 2 meetings before they apply.

<b><u>Additional information:</u></b>

**SAN LUIS OBISPO COUNTY COMMISSION ON AGING  
COMMISSIONER'S DUTIES**

1. Attend monthly Commission on Aging meetings. Please visit: <https://www.slocounty.ca.gov/departments/social-services/commission-on-aging> for upcoming meetings.
2. Inform the Commission of concerns, projects, issues specific to your area of interest about challenges facing Seniors i.e., affordable housing, affordable healthcare, in home services, etc.
3. Support recommendations of appropriate action to the Board of Supervisors on legislative bills concerning the Senior population.
4. Provide and distribute information to your geographic area about the Commission on Aging (purpose, advocacy concerns, accomplishments).
5. Notify the Commission Officers about speakers and presenters with relevant information who can inform Commissioners about COA priority issues.
6. Be an active participant on Committees and special Task Forces.
7. Be willing to speak on behalf of the Commission at Board of Supervisor's meetings, City Council meetings, Special District meetings or other Senior meetings on issues of concern for Seniors of the County.
8. Be an Advocate for all your fellow Seniors.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return to: Nominating Committee email: [commissiononaging@gmail.com](mailto:commissiononaging@gmail.com) or bring in person to the next commission meeting.**

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For Commission Officers Only

Notes: \_\_\_\_\_  
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Approval Date: \_\_\_\_\_ Commissioner signature: \_\_\_\_\_