



REGIONAL WORKFORCE DEVELOPMENT BOARD MEETING AGENDA

Thursday, June 9, 2022, 10:00 AM

Primary Locations:

Lake Location: CareerPoint Lake, 55 First Street, Suite 114, Lakeport, CA, Osprey Rm.

Marin Location: San Rafael Chamber of Commerce, 817 Mission Ave., San Rafael, CA

Mendocino Location: Ukiah Adult School, 1056 N Bush St, Ukiah, CA

Napa Location: CareerPoint Napa, 1546 First Street, Napa, CA, Upstairs

Secondary Location:

3275 Atherton Circle, Napa, CA

Zoom Call-In Information:

<https://us06web.zoom.us/j/82214928094?pwd=c2pjUTZEUWtNcFpXeEMwK0lrMW9MUT09>

Call-in Number: +1 253 215 8782 Meeting ID: 822 1492 8094 Passcode: 792935

CALL TO ORDER

- | | |
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| I. | <ul style="list-style-type: none"> A. Welcome, Introductions, Agenda Review B. Public Comment C. Chair Update D. Members Update E. Executive Director |
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CONSENT CALENDAR

These matters typically include routine financial or administrative **action items** requiring a vote.
Any item will be discussed separately at the request of any member. Items are approved with one single motion.

- | | |
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| II. | <ul style="list-style-type: none"> A. Approval of December 9, 2021 Meeting Minutes [Attachment II.A] B. Ratify WANB Agreements [Board Letter II.B] C. Ratification of Regional Workforce Development Board Members [Board Letter II.C] [Attachment II.C] D. Ratification of Subcommittee Member Applications & Renewals [Board Letter II.D] [Attachment II.D] E. Funding Transfer Request: CareerPoint Lake & CareerPoint Mendocino [Board Letter II.E] |
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REGULAR CALENDAR / DISCUSSION

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| III. | <ul style="list-style-type: none"> A. North Bay Employment Connection (NBEC) Study Report [Board Letter III.A] (Presentation & Discussion) B. CareerPoint North Bay/American Job Center of California MOU [Board Letter III.B] (Action) C. One-Stop Operations [Board Letter III.C] (Presentation & Discussion) D. Ecology Corps [Board Letter III.D] (Presentation & Discussion) |
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| IV. | A. Adjourn |
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Attachment II.A
REGIONAL WORKFORCE DEVELOPMENT BOARD
MEETING MINUTES

Thursday, December 9, 2021



Primary Locations:

Lake Location: 55 First Street, Suite 114, Lakeport, CA 95453, Osprey Room

Marin Location: 1111 Las Gallinas Ave., San Rafael, CA 94903, Board Room

Mendocino Location: 1056 N Bush St, Ukiah, CA 95482, Conference Room

Napa Location: 1546 First Street, Napa, CA 94559, Upstairs

Secondary Locations

1250 Main Street, Suite 200, Napa, CA 94559

3275 Atherton Circle, Napa, CA 94559

1201 Vine Street, Suite 103, Healdsburg, CA 95448, Conference Room

99 Montecillo Way San Rafael, CA 94903

Call-in number: +1 253 215 8782, Meeting ID: 890 9640 7754, Password: 454164

<https://us06web.zoom.us/j/89096407754?pwd=YTBlWDgraVFwcmZaK2lrRWpFUDFLZz09>

CALL TO ORDER

I. A. Welcome, Introductions, Agenda Review

Acting Chair, Paul Hicks called the meeting to order at 10:04 a.m.

Board Members Present: Paul Hicks, Rebecca Southwick, Christy Smith, Paul Castro, Frank Cuneo, Geovanni Flores, Vin Smith, David Wayte, Keith Dias, Mark Van Gorder, Marty Flynn, Ken Lippi (left at III.C), Susan Byrne (left at III.C)

Members Absent: Cecilia Zamora, Emilia Bartolomeu, Jeri Hansen, Joanne Webster, Mark Bontrager, Rick Wells, Robert Eyler, Elizabeth Sheehan

Workforce Alliance Staff Present: Executive Director Bruce Wilson, Taylor Swain, Laura Davis, Doug Orlando, Sita Williams

CareerPoint Staff Present: Christy Gard, Brian Hooker

B. Public Comment

None.

C. Chair Update

None.

D. Members Update

Board members did a brief update on current affairs in their areas of business.

E. Executive Director

1. Legislative Update (Attached)

Executive Director, Bruce Wilson, gave a legislative update.

CONSENT CALENDAR

These matters typically include routine financial or administrative **action items** requiring a vote.
Any item will be discussed separately at the request of any member. Items are approved with one single motion.

II. A. Approval of June 10, 2021 Meeting Minutes [Attachment II.A]

B. Ratify WANB Agreements [Board Letter II.B.]

C. Ratification of Subcommittee Member Application Renewal [Board Letter II.C] [Attachment II.C]

Attachment II.A

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|---|--|
| | <p>D. Ratification of Regional Workforce Development Board Member [Board Letter II.D] [Attachment II.D]</p> <p>E. Master Meeting Calendar [Attachment II.E]</p> <p>Motion made to approve consent calendar. M/S: Keith Dias/Vin Smith Passed unanimously: 13:0 Abstentions: 0</p> |
| R E G U L A R C A L E N D A R / D I S C U S S I O N | |
| III. | <p>A. Department of Rehabilitation Demand Side Employment Initiative, Toussaint Wade, DOR DSEI Coordinator [Board Letter III.A] (Presentation)</p> <p>Toussaint Wade from the Department of Rehabilitation discussed the D.O.R.'s new Demand Side Employment Initiative.</p> <p>B. WIOA and One Stop Background & Partnerships [Board Letter III.B] (Presentation)</p> <p>Executive Director, Bruce Wilson, and Workforce Development Specialist, Doug Orlando discussed how the One Stop Career Centers works and how the community partners fit in.</p> <p>C. Ratification and approval of America's Job Center of California (AJCC) Comprehensive Certification [Board Letter III.C] [Attachment III.C] (Action)</p> <p>Action Tabled for III.C. Will be reviewed again at a future board meeting.</p> <p>D. Ratify / Accept PY 19-20 Single Audit [Board Letter III.D] (Action)</p> <p>Motion made to Ratify/Accept PY 19-20 Single Audit M/S: Frank Cuneo/Paul Castro Passed unanimously: 11:0 Abstentions: 0</p> <p>E. Update Regional Workforce Board Bylaws (Board Letter III.E) [Attachment III.E] (Action)</p> <p>Motion made to update Regional Workforce Board Bylaws M/S: Mark Van Gorder/Vin Smith Passed unanimously: 11:0 Abstentions: 0</p> |
| A D J O U R N | |
| IV. | <p>A. Adjourn</p> <p>Meeting was adjourned at 11:48 a.m.</p> |

BOARD LETTER II.B



TO: REGIONAL WORKFORCE DEVELOPMENT BOARD
FROM: STAFF
SUBJECT: BOARD LETTER II.B – RATIFY APPROVAL OF WORKFORCE ALLIANCE AGREEMENTS
DATE: JUNE 9, 2022
CC: FILE

JPA staff solicits Regional Workforce Development Board ratification for the following agreements and amendments enacted by the Executive Committee and Governing Board.:

| CONTRACTOR | NEW/ AMENDMENT | AMOUNT | COMMENTS |
|--|-------------------|-------------|---|
| Conservation Corps North Bay | New | \$61,016 | New agreement to provide an 8-week youth ecology work experience program for Marin and Napa counties. |
| Arbor E&T, LLC dba Equus Workforce Solutions | Amendment | \$4,192,579 | Provision of WIOA program services in Lake, Marin, Mendocino, and Napa Counties for Program Year 2021-2022. Amendment incorporates carrying funds from the previous year, Lake County \$276,042, Marin County \$189,144, Mendocino County \$444,436, Napa County \$32,557 for a new agreement maximum of \$4,192,579. |
| Arbor E&T, LLC dba Equus Workforce Solutions | New | \$50,000 | Provision of One Stop Operation Services for the remainder of Program Year 21-22 in all four counties for \$10,000 and \$40,000 for PY22–23. |
| CliftonLarsonAllen LLP | Amendment #2 & #3 | \$33,752 | Provision of annual single audit services: \$16,080 for PY 19-20 and \$17,672 for PY 20-21 |

STAFF RECOMMENDATION

Ratify agreements with the above noted contractors and partners and authorize Board Chair and/or Executive Director to sign final negotiated agreements.



TO: REGIONAL WORKFORCE DEVELOPMENT BOARD
FROM: STAFF
SUBJECT: BOARD LETTER II.C– APPROVE APPOINTMENT OF REGIONAL WORKFORCE DEVELOPMENT BOARD MEMBERS
DATE: JUNE 9, 2022
CC: FILE

BACKGROUND

The Workforce Alliance of the North Bay (WANB) Regional Workforce Development Board (RWDB) is a legislatively mandated business led board. In partnership with the WANB Governing Board, the Workforce Development Board oversees workforce development activities and establishes policies and programs in response to the workforce needs of Marin, Napa, Mendocino and Lake Counties. It is the region’s only organization that has workforce development as its sole purpose and function.

The WIOA Section 107(b)(2)(A) through (E) states the requirements for nominating and selecting members in each membership category:

1. Representatives of Business (majority of board)
2. Representatives of Labor (>20%)– including labor, apprenticeship, community-based organizations, and youth serving organizations.
3. Representatives of Education – including adult & literacy activities, higher education, agencies and organizations addressing the education or training needs of individuals with barriers to employment.
4. Representatives of Governmental and Economic and Community Development – including state employment office, vocational rehabilitation and economic development.

WANB Staff received two new Regional Workforce Development Board membership applications. Staff have reviewed the applications and have confirmed that the appointments would meet WIOA requirements.

Representatives of Education

1. Bryan Avila, Co-Founder, Vintners Institute
2. Jason Henderson, Regional Banking Senior Manager, Vice President – Southern Marin District, Wells Fargo Bank

SAFF RECOMMENDATION

Approve above individuals for appointment to the WANB Regional Workforce Development Board.

Attachment II.C



WORKFORCE ALLIANCE OF THE NORTH BAY

DRIVING WORKFORCE TALENT

Application for Regional and/or Local Advisory Subcommittee Membership

In accordance with the Workforce Innovation and Opportunity Act of 2014 (WIOA), the Workforce Alliance of the North Bay (WANB) Governing Board has established a Regional Workforce Development Board (WDB) for Napa, Marin, Lake and Mendocino counties which sets policy for and provides oversight of workforce development programs in the four counties. Workforce Development Board members are appointed by the Governing Board to represent specified sectors of the community as listed in Section IV below. The county advisory subcommittees were created to make recommendations to the full WDB that specifically pertain to their respective county's employers and their workforce. There is a sub committee for each of the WANB counties.

Individuals interested in serving on the WDB or workforce committee must complete and submit this application for appointment. This application and the related Nomination Form(s), if any, may be subject to public disclosure.

Please check the appropriate box:

- ☒ Regional Workforce Development Board (WDB) Membership
☐ Advisory Subcommittee for _____ county Membership
☐ Renew Membership (if your information hasn't changed please fill out only Section I. and sign the form)
☐ Update Information

Section I. Personal Information

First Name: Bryan Last Name: Avila M.I.: P
 Home Address: [REDACTED] City: [REDACTED] Zip: [REDACTED]
 Mailing Address: Same as Home Address City: Zip:
 Cell Phone: [REDACTED] Alternate Phone:
 Email Address: [REDACTED]

Section II. County / Location

Provide the county in which your residence, business or organization is located:

Section III. Occupational Information

Industry Sector: wine
 Occupation / Title: Managing Director/Founder
 Employer: Vintners Institute

Attachment II.C

Employer Address: 2970 Laurel Street

City: Napa

State: Ca

Zip: 94558

Employer Phone:

Section IV. Eligibility Certification

Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.

☒ **Business Member** (Do you represent a "small business" as defined by the U.S. Small Business Administration? ☐ Y ☐ N)

Name of Business: Vintners Institute

☐ **Labor Organization**

Name of
Organization:

☐ **Joint Labor-Management Apprentice Program**

Name of
Organization:

☐ **Community-based Organization**

Name of
Organization:

☐ **Adult Education and Literacy**

Name of Provider:

☐ **Higher Education**

Name of Institution:

☐ **Economic and Community Development**

Name of Entity:

☐ **State Employment Office**

☐ **Vocational Rehab**

Name of Program:

Section V.

Describe how your participation on the WDB would advance Workforce Development programs.

The Vintners Institute serves growers and vintners located in the United States in three major areas, workforce training of entry-level vineyard and winery workers, oversight of an apprenticeship program and coordination of technical applied research.

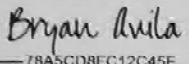
This organization teaches best practices, develops talent and works to advance the industry through facilitation of research that helps the wine industry navigate current industry opportunities and challenges.

Attachment II.C

Please be advised that members of the Workforce Development Board:

- May be required to take an Oath of Office.
- Must comply with the County's Ethics Ordinance.
- Must participate in State-mandated ethics training.
- Must disclose financial interests as required by the County Code (Form 700).
- Must report any conflicts of interest as required by the County Code.

I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.

| | |
|---|------------|
| DocuSigned by:  78A5GD8FC12C45E... | 7 FEB 2022 |
| Signature | Date |

Send completed applications to:

Workforce Alliance of the North Bay
P.O. BOX 247
Napa, CA 94559

or email to:
boardadmin@workforcealliancenorthbay.org



Application for Regional and/or Local Advisory Subcommittee Membership

In accordance with the Workforce Innovation and Opportunity Act of 2014 (WIOA), the Workforce Alliance of the North Bay (WANB) Governing Board has established a Regional Workforce Development Board (WDB) for Napa, Marin, Lake and Mendocino counties which sets policy for and provides oversight of workforce development programs in the four counties. Workforce Development Board members are appointed by the Governing Board to represent specified sectors of the community as listed in Section IV below. The county advisory subcommittees were created to make recommendations to the full WDB that specifically pertain to their respective county's employers and their workforce. There is a sub committee for each of the WANB counties.

Individuals interested in serving on the WDB or workforce committee must complete and submit this application for appointment. This application and the related Nomination Form(s), if any, may be subject to public disclosure.

Please check the appropriate box:

☒ **X Regional Workforce Development Board (WDB) Membership**

☒ Advisory Subcommittee for Marin county Membership *Renewal

☒ **X Renew Membership (if your information hasn't changed please fill out only Section I. and sign the form)**

☐ Update Information

Section I. Personal Information

First Name: Jason

Last Name: Henderson

M.I.: B

Home Address: [REDACTED]

City: [REDACTED]

Zip: [REDACTED]

Mailing Address: Same

City: Same

Zip: Same

Cell Phone: [REDACTED]

Alternate Phone: [REDACTED]

Email Address:

Section II. County / Location

Provide the county in which your residence, business or organization is located:

Section III. Occupational Information

Industry Sector:

Occupation / Title:

Employer:

Attachment II.C

| | | |
|--|--------|------|
| Employer Address: | | |
| City: | State: | Zip: |
| Employer Phone: | | |
| Section IV. Eligibility Certification | | |
| <i>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</i> | | |
| <input type="checkbox"/> Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input type="checkbox"/> Y <input type="checkbox"/> N) <i>Name of Business:</i> | | |
| <input type="checkbox"/> Labor Organization <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Joint Labor-Management Apprenticeship Program <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Community-based Organization <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Adult Education and Literacy <i>Name of Provider:</i> | | |
| <input type="checkbox"/> Higher Education <i>Name of Institution:</i> | | |
| <input type="checkbox"/> Economic and Community Development <i>Name of Entity:</i> | | |
| <input type="checkbox"/> State Employment Office | | |
| <input type="checkbox"/> Vocational Rehab <i>Name of Program:</i> | | |
| Section V. | | |
| Describe how your participation on the WDB would advance Workforce Development programs. | | |
| | | |

Attachment II.C

Please be advised that members of the Workforce Development Board:

- May be required to take an Oath of Office.
- Must comply with the County's Ethics Ordinance.
- Must participate in State-mandated ethics training.
- Must disclose financial interests as required by the County Code (Form 700).
- Must report any conflicts of interest as required by the County Code.

I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.

Jason B. Henderson (electronic Signature)

January 24, 2021

Signature

Date

Send completed applications to:

Workforce Alliance of the North Bay
P.O. BOX 247
Napa, CA 94559

or email to:

boardadmin@workforcealliancenorthbay.org



TO: REGIONAL WORKFORCE DEVELOPMENT BOARD
FROM: STAFF
SUBJECT: BOARD LETTER II.D– APPROVE APPOINTMENT & REAPPOINTMENT OF SUBCOMMITTEE MEMBERS
DATE: JUNE 9, 2022
CC: FILE

BACKGROUND

The Workforce Alliance Regional Workforce Development Board (RWDB) is a legislatively mandated business led board. In partnership with the Workforce Alliance Governing Board, the RWDB oversees Lake, Marin, Mendocino and Napa Counties' workforce development activities and establishes programs in response to the workforce needs of those communities. It is the region's only organization that has workforce development as its sole purpose and function.

In accordance with Section 18, item e of the Joint Powers Agreement, signed by each member county's board of supervisors, there will be four standing subcommittees:

1. Lake County
2. Marin County
3. Mendocino County
4. Napa County

The following individual submitted a renewal for membership to a WANB Advisory Subcommittee:

Lake Advisory Subcommittee

- iv. Laura McAndrews Sammel
- v. Susan Parker, Lake County – renewal
- vi. Theresa Showen, Lake County Department of Social Services
- vii. Kevin Reynolds, Reynolds Systems Inc.

Marin Advisory Subcommittee

- viii. Heather Bettini, Community Action Marin
- ix. Katheryn Horton, College of Marin – renewal
- x. Bill Mueller, Lucid Automation Security
- xi. Jaemi Nash, Tamalpais Adult School – renewal
- xii. Miles Smith, IBM

Mendocino Advisory Subcommittee:

- i. Laura Liberty, Factory Pipe, LLC
- ii. Dorianne Tanaka, Ukiah Valley Association for Habilitation
- iii. Jolee White, Adventist Health

SAFF RECOMMENDATION - Approve above individuals for appointment/reappointment to the WANB Advisory Subcommittees.



WORKFORCE ALLIANCE OF THE NORTH BAY

DRIVING WORKFORCE TALENT

Application for Regional and/or Local Advisory Subcommittee Membership

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Individuals interested in serving on the WDB or workforce committee must complete and submit this application for appointment. This application and the related Nomination Form(s), if any, may be subject to public disclosure.

Please check the appropriate box:

- ☐ Regional Workforce Development Board (WDB) Membership
☒ Advisory Subcommittee for LAKE county Membership
☐ Renew Membership (if your information hasn't changed please fill out only Section I. and sign the form)
☐ Update Information

Section I. Personal Information

First Name: LUPE Last Name: McANDREWS-SUMER M.I.:
 Home Address: [REDACTED] City: [REDACTED] Zip: [REDACTED]
 Mailing Address: [REDACTED] City: [REDACTED] Zip: [REDACTED]
 Cell Phone: [REDACTED] Alternate Phone: [REDACTED]
 Email Address: [REDACTED]

Section II. County / Location

Provide the county in which your residence, business or organization is located:

Section III. Occupational Information

Industry Sector:

Occupation / Title:

CEO

Employer:

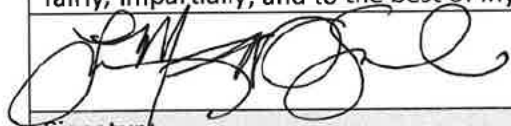
LAKE COUNTY CHAMBER OF COMMERCE

| | | |
|---|------------------|-------------------|
| Employer Address: 875 LAKEPORT BLVD. | | |
| City: LAKEPORT | State: CA | Zip: 95453 |
| Employer Phone: 707.263.5092 | | |
| Section IV. Eligibility Certification | | |
| <p><i>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</i></p> | | |
| <input checked="" type="checkbox"/> Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N) Name of Business: LAKE COUNTY CHAMBER OF COMMERCE (LCCC) | | |
| <input type="checkbox"/> Labor Organization Name of Organization: | | |
| <input type="checkbox"/> Joint Labor-Management Apprenticeship Program Name of Organization: | | |
| <input type="checkbox"/> Community-based Organization Name of Organization: | | |
| <input type="checkbox"/> Adult Education and Literacy Name of Provider: | | |
| <input type="checkbox"/> Higher Education Name of Institution: | | |
| <input type="checkbox"/> Economic and Community Development Name of Entity: | | |
| <input type="checkbox"/> State Employment Office | | |
| <input type="checkbox"/> Vocational Rehab Name of Program: | | |
| Section V. | | |
| Describe how your participation on the WDB would advance Workforce Development programs. | | |
| <p>The mission of the Lake County Chamber of Commerce is to enhance the economic vitality and prosperity of our communities. One of the best ways to fulfill that mission is to focus on people – our workforce. My current position as one of the voices of the Lake County business community, as well as my background as a human resource professional, would allow me to enhance the WDB's workforce development programs.</p> | | |

Please be advised that members of the Workforce Development Board:

- **May be required to take an Oath of Office.**
- **Must comply with the County's Ethics Ordinance.**
- **Must participate in State-mandated ethics training.**
- **Must disclose financial interests as required by the County Code (Form 700).**
- **Must report any conflicts of interest as required by the County Code.**

I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.



Signature

02/15/2022

Date

Send completed applications to:

Workforce Alliance of the North Bay
P.O. BOX 247
Napa, CA 94559

or email to:
boardadmin@workforcealliancenorthbay.org



WORKFORCE ALLIANCE OF THE NORTH BAY

DRIVING WORKFORCE TALENT

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Please check the appropriate box:

- ☐ Regional Workforce Development Board (WDB) Membership
☒ Advisory Subcommittee for LAKE county Membership
☒ Renew Membership (if your information hasn't changed please fill out only Section I. and sign the form)
☐ Update Information

Section I. Personal Information

First Name: Juan Last Name: Parker M.I.: R
 Home Address: [REDACTED] City: [REDACTED] Zip: [REDACTED]
 Mailing Address: [REDACTED] City: [REDACTED] Zip: [REDACTED]
 Cell Phone: [REDACTED] Alternate Phone: [REDACTED]
 Email Address: [REDACTED]

Section II. County / Location

Provide the county in which your residence, business or organization is located:

Section III. Occupational Information

Industry Sector:

Occupation / Title:

Employer:

| | | |
|---|--------|------|
| Employer Address: | | |
| City: | State: | Zip: |
| Employer Phone: | | |
| Section IV. Eligibility Certification | | |
| <p><i>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</i></p> | | |
| <input type="checkbox"/> Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input type="checkbox"/> Y <input type="checkbox"/> N) <i>Name of Business:</i> | | |
| <input type="checkbox"/> Labor Organization <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Joint Labor-Management Apprenticeship Program <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Community-based Organization <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Adult Education and Literacy <i>Name of Provider:</i> | | |
| <input type="checkbox"/> Higher Education <i>Name of Institution:</i> | | |
| <input type="checkbox"/> Economic and Community Development <i>Name of Entity:</i> | | |
| <input type="checkbox"/> State Employment Office | | |
| <input type="checkbox"/> Vocational Rehab <i>Name of Program:</i> | | |
| Section V. | | |
| Describe how your participation on the WDB would advance Workforce Development programs. | | |
| | | |

| | |
|---|------------------|
| <p>Please be advised that members of the Workforce Development Board:</p> <ul style="list-style-type: none"> • May be required to take an Oath of Office. • Must comply with the County's Ethics Ordinance. • Must participate in State-mandated ethics training. • Must disclose financial interests as required by the County Code (Form 700). • Must report any conflicts of interest as required by the County Code. | |
| <p>I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.</p> | |
|  | <p>4.26.2022</p> |
| Signature | Date |
| <p>Send completed applications to:</p> <p>Workforce Alliance of the North Bay P.O. BOX 247 Napa, CA 94559</p> <p>or email to: boardadmin@workforcealliancenorthbay.org</p> | |



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Please check the appropriate box:

- ☐ Regional Workforce Development Board (WDB) Membership
☐ Advisory Subcommittee for _____ county Membership
☐ Renew Membership (if your information hasn't changed please fill out only Section I. and sign the form)
☐ Update Information

Section I. Personal Information

First Name: Theresa Last Name: Showen M.I.: B
 Home Address: [REDACTED] City: [REDACTED] Zip: [REDACTED]
 Mailing Address: same City: _____ Zip: _____
 Cell Phone: [REDACTED] Alternate Phone: [REDACTED]
 Email Address: [REDACTED]

Section II. County / Location

Provide the county in which your residence, business or organization is located: LAKE

Section III. Occupational Information

Industry Sector: Government, Social Services, Employment Division
 Occupation / Title: Program Manager
 Employer: County of Lake

| | | |
|--|-----------|------|
| Employer Address: | | |
| City: | State: CA | Zip: |
| Employer Phone: 707 263- | | |
| Section IV. Eligibility Certification | | |
| <i>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</i> | | |
| <input type="checkbox"/> Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input type="checkbox"/> Y <input type="checkbox"/> N) <i>Name of Business:</i> | | |
| <input type="checkbox"/> Labor Organization <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Joint Labor-Management Apprentice Program <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Community-based Organization <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Adult Education and Literacy <i>Name of Provider:</i> | | |
| <input type="checkbox"/> Higher Education <i>Name of Institution:</i> | | |
| <input type="checkbox"/> Economic and Community Development <i>Name of Entity:</i> | | |
| <input type="checkbox"/> State Employment Office | | |
| <input type="checkbox"/> Vocational Rehab <i>Name of Program:</i> | | |
| Section V. | | |
| Describe how your participation on the WDB would advance Workforce Development programs. | | |
| <p>Lake County Social Services, Employment Services division serves Lake County CalWORKs clients through Welfare-to-Work programs and is a mandated WIOA partner agency. Our primary focus is assisting clients to become work ready so they can gain employment that will support their families so they can become stable and self-sufficient.</p> | | |

Please be advised that members of the Workforce Development Board:

- **May be required to take an Oath of Office.**
- **Must comply with the County's Ethics Ordinance.**
- **Must participate in State-mandated ethics training.**
- **Must disclose financial interests as required by the County Code (Form 700).**
- **Must report any conflicts of interest as required by the County Code.**

I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.

document was signed, unable to edit original to include.

Signature

Date

Send completed applications to:

Workforce Alliance of the North Bay
P.O. BOX 247
Napa, CA 94559

or email to:
boardadmin@workforcealliancenorthbay.org



WORKFORCE ALLIANCE OF THE NORTH BAY

DRIVING WORKFORCE TALENT

Application for Regional and/or Local Advisory Subcommittee Membership

In accordance with the Workforce Innovation and Opportunity Act of 2014 (WIOA), the Workforce Alliance of the North Bay (WANB) Governing Board has established a Regional Workforce Development Board (WDB) for Napa, Marin, Lake and Mendocino counties which sets policy for and provides oversight of workforce development programs in the four counties. Workforce Development Board members are appointed by the Governing Board to represent specified sectors of the community as listed in Section IV below. The county advisory subcommittees were created to make recommendations to the full WDB that specifically pertain to their respective county's employers and their workforce. There is a sub committee for each of the WANB counties.

Individuals interested in serving on the WDB or workforce committee must complete and submit this application for appointment. This application and the related Nomination Form(s), if any, may be subject to public disclosure.

Please check the appropriate box:

- ☐ Regional Workforce Development Board (WDB) Membership
☒ Advisory Subcommittee for LAKE county Membership
☐ Renew Membership (if your information hasn't changed please fill out only Section I. and sign the form)
☐ Update Information

Section I. Personal Information

| | | |
|---------------------------|---------------------|-----------------|
| First Name: Kevin | Last Name: Reynolds | M.I.: |
| Home Address: [REDACTED] | City: [REDACTED] | Zip: [REDACTED] |
| Mailing Address: | City: | Zip: |
| Cell Phone: [REDACTED] | Alternate Phone: | |
| Email Address: [REDACTED] | | |

Section II. County / Location

Provide the county in which your residence, business or organization is located: Lake County

Section III. Occupational Information

| |
|--|
| Industry Sector: Aerospace |
| Occupation / Title: Director Of Operations |
| Employer: Reynolds Systems, Inc. |

| | | |
|---|-----------|------------|
| Employer Address: PO BOX 1229 | | |
| City: Middletown | State: CA | Zip: 95461 |
| Employer Phone: 707-928-5244 | | |
| Section IV. Eligibility Certification | | |
| <p><i>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</i></p> | | |
| <input checked="" type="checkbox"/> Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N) <i>Name of Business:</i> | | |
| <input type="checkbox"/> Labor Organization <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Joint Labor-Management Apprenticeship Program <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Community-based Organization <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Adult Education and Literacy <i>Name of Provider:</i> | | |
| <input type="checkbox"/> Higher Education <i>Name of Institution:</i> | | |
| <input type="checkbox"/> Economic and Community Development <i>Name of Entity:</i> | | |
| <input type="checkbox"/> State Employment Office <i>Name of Program:</i> | | |
| Section V. | | |
| Describe how your participation on the WDB would advance Workforce Development programs. | | |
| <p>Over the last six years, I have been the Director of Operations/Owner for an aerospace company located in Lake County. The company has many different fields including engineering, finance, quality and manufacturing.</p> <p>I have experienced the challenges of running a growing company in a County that lacks the workforce required for our industry. We have created intern and scholarships programs with local high schools to encourage students into becoming STEM majors. The goal is to keep local talent by offering them jobs once they have graduated. We have also been building relationships with Sacramento State, UC Davis and Sonoma State to offer internships and careers to students from outside Lake County.</p> <p>I look forward to the opportunity to continue contributing to Lake County and helping build a more educated workforce for all business in the area.</p> | | |

Please be advised that members of the Workforce Development Board:

- May be required to take an Oath of Office.
- Must comply with the County's Ethics Ordinance.
- Must participate in State-mandated ethics training.
- Must disclose financial interests as required by the County Code (Form 700).
- Must report any conflicts of interest as required by the County Code.

I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.

| | |
|---|--|
|  |  |
| Signature | Date |

Send completed applications to:

Workforce Alliance of the North Bay
P.O. BOX 247
Napa, CA 94559

or email to:
boardadmin@workforcealliancenorthbay.org



Application for Regional and/or Local Advisory Subcommittee Membership

In accordance with the Workforce Innovation and Opportunity Act of 2014 (WIOA), the Workforce Alliance of the North Bay (WANB) Governing Board has established a Regional Workforce Development Board (WDB) for Napa, Marin, Lake and Mendocino counties which sets policy for and provides oversight of workforce development programs in the four counties. Workforce Development Board members are appointed by the Governing Board to represent specified sectors of the community as listed in Section IV below. The county advisory subcommittees were created to make recommendations to the full WDB that specifically pertain to their respective county's employers and their workforce. There is a sub committee for each of the WANB counties.

Individuals interested in serving on the WDB or workforce committee must complete and submit this application for appointment. This application and the related Nomination Form(s), if any, may be subject to public disclosure.

Please check the appropriate box:

- ☐ Regional Workforce Development Board (WDB) Membership
☒ Advisory Subcommittee for _Marin_____ county Membership
☐ Renew Membership (if your information hasn't changed please fill out only Section I. and sign the form)
☐ Update Information

Section I. Personal Information

First Name: Heather

Last Name: Bettini

M.I.: D

[Redacted Address Lines]

Section II. County / Location

Provide the county in which your residence, business or organization is located: Marin

Section III. Occupational Information

Industry Sector: Nonprofit

Occupation / Title: Director, Economic Justice

Employer: Community Action Marin

| | | |
|---|-----------|------------|
| Employer Address: 555 Northgate Drive, Suite 201 | | |
| City: San Rafael | State: CA | Zip: 94903 |
| Employer Phone: 415-526-7500 | | |
| Section IV. Eligibility Certification | | |
| <p><i>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</i></p> | | |
| <input type="checkbox"/> Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input type="checkbox"/> Y <input type="checkbox"/> N) <i>Name of Business:</i> | | |
| <input type="checkbox"/> Labor Organization <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Joint Labor-Management Apprenticeship Program <i>Name of Organization:</i> | | |
| <input checked="" type="checkbox"/> Community-based Organization <i>Name of Organization:</i> Community Action Marin | | |
| <input type="checkbox"/> Adult Education and Literacy <i>Name of Provider:</i> | | |
| <input type="checkbox"/> Higher Education <i>Name of Institution:</i> | | |
| <input type="checkbox"/> Economic and Community Development <i>Name of Entity:</i> | | |
| <input type="checkbox"/> State Employment Office | | |
| <input type="checkbox"/> Vocational Rehab <i>Name of Program:</i> | | |
| Section V. | | |
| Describe how your participation on the WDB would advance Workforce Development programs. | | |
| <p>I manage Community Action Marin's workforce development programming, and in that capacity, I operate multiple job training programs that align with in-demand industries in Marin County. I would bring experience supporting under-resourced populations, including individuals experiencing homelessness, immigrants, single parents, etc. to complete workforce development training programs and launch careers in the commercial driving, early care and education, and food industries. I have developed robust partnerships to ensure participants can access the mental health, childcare, job readiness and other services they need to succeed in training programs and their careers. I have a vision to integrate intake and data collection systems across agencies to streamline workforce systems and render them more accessible to our community. I would bring the perspective of the diverse job seekers who seek fulfilling employment to ensure their voices are included in decision-making about systems that affect them. I am committed to supporting the successful creation of a job center hub in Marin County through which job seekers can access a multitude of bundled services that will allow them to achieve self-sufficiency and thrive.</p> | | |

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- Must participate in State-mandated ethics training.
- Must disclose financial interests as required by the County Code (Form 700).
- Must report any conflicts of interest as required by the County Code.

I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.

| | |
|------------------------|-----------|
| <i>Heather Bettini</i> | 4/22/2022 |
| Signature | Date |

Send completed applications to:

Workforce Alliance of the North Bay
P.O. BOX 247
Napa, CA 94559

or email to:
boardadmin@workforcealliancenorthbay.org



WORKFORCE ALLIANCE OF THE NORTH BAY

DRIVING WORKFORCE TALENT

Application for Regional and/or Local Advisory Subcommittee Membership

In accordance with the Workforce Innovation and Opportunity Act of 2014 (WIOA), the Workforce Alliance of the North Bay (WANB) Governing Board has established a Regional Workforce Development Board (WDB) for Napa, Marin, Lake and Mendocino counties which sets policy for and provides oversight of workforce development programs in the four counties. Workforce Development Board members are appointed by the Governing Board to represent specified sectors of the community as listed in Section IV below. The county advisory subcommittees were created to make recommendations to the full WDB that specifically pertain to their respective county's employers and their workforce. There is a sub committee for each of the WANB counties.

Individuals interested in serving on the WDB or workforce committee must complete and submit this application for appointment. This application and the related Nomination Form(s), if any, may be subject to public disclosure.

Please check the appropriate box:

- ☐ Regional Workforce Development Board (WDB) Membership
☒ xAdvisory Subcommittee for Marin county Membership
☐ Renew Membership (if your information hasn't changed please fill out only Section I. and sign the form)
☐ Update Information

Section I. Personal Information

First Name: Katheryn Last Name: Horton M.I.: M

[REDACTED] [REDACTED] [REDACTED] [REDACTED] Zip: [REDACTED]

Mailing Address: Same City: [REDACTED] Zip: [REDACTED]

Cell Phone: [REDACTED] Alternate Phone: [REDACTED]

Email Address: [REDACTED]

Section II. County / Location

Provide the county in which your residence, business or organization is located: Marin

Section III. Occupational Information

Industry Sector: Education

Occupation / Title: Director of Workforce Programs

Employer: College of Marin

| | | | |
|--|--|--------|-------|
| Employer Address: 1200 Ignacio Blvd | | | |
| City: | Novato | State: | CA |
| | | Zip: | 94949 |
| Employer Phone: | | | |
| Section IV. Eligibility Certification | | | |
| <i>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</i> | | | |
| <input type="checkbox"/> | Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input type="checkbox"/> Y <input type="checkbox"/> N) Name of Business: | | |
| <input type="checkbox"/> | Labor Organization Name of Organization: | | |
| <input type="checkbox"/> | Joint Labor-Management Apprenticeship Program Name of Organization: | | |
| <input type="checkbox"/> | Community-based Organization Name of Organization: | | |
| <input type="checkbox"/> | Adult Education and Literacy Name of Provider: | | |
| <input checked="" type="checkbox"/> | Higher Education Name of Institution: College of Marin | | |
| <input type="checkbox"/> | Economic and Community Development Name of Entity: | | |
| <input type="checkbox"/> | State Employment Office | | |
| <input type="checkbox"/> | Vocational Rehab Name of Program: | | |
| Section V. | | | |
| Describe how your participation on the WDB would advance Workforce Development programs. | | | |
| Knowledge of workforce training programs that align with livable wage jobs in Marin. | | | |

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- Must comply with the County's Ethics Ordinance.
- Must participate in State-mandated ethics training.
- Must disclose financial interests as required by the County Code (Form 700).
- Must report any conflicts of interest as required by the County Code.

I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.

| | |
|------------------------|---------|
| <i>Katheryn Horton</i> | 4/25/22 |
| Signature | Date |

Send completed applications to:

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P.O. BOX 247
Napa, CA 94559

or email to:
boardadmin@workforcealliancenorthbay.org



Application for Regional and/or Local Advisory Subcommittee Membership

In accordance with the Workforce Innovation and Opportunity Act of 2014 (WIOA), the Workforce Alliance of the North Bay (WANB) Governing Board has established a Regional Workforce Development Board (WDB) for Napa, Marin, Lake and Mendocino counties which sets policy for and provides oversight of workforce development programs in the four counties. Workforce Development Board members are appointed by the Governing Board to represent specified sectors of the community as listed in Section IV below. The county advisory subcommittees were created to make recommendations to the full WDB that specifically pertain to their respective county's employers and their workforce. There is a sub committee for each of the WANB counties.

Individuals interested in serving on the WDB or workforce committee must complete and submit this application for appointment. This application and the related Nomination Form(s), if any, may be subject to public disclosure.

Please check the appropriate box:

- ☐ Regional Workforce Development Board (WDB) Membership
☒ Advisory Subcommittee for Marin county Membership
☐ Renew Membership (if your information hasn't changed please fill out only Section I. and sign the form)
☐ Update Information

Section I. Personal Information

First Name: Bill Last Name: Mueller M.I.: _____
 Home Address: _____ City: _____ Zip: _____
 Mailing Address: _____ City: _____ Zip: _____
 Cell Phone: _____ Alternate Phone: _____
 Email Address: _____

Section II. County / Location

Provide the county in which your residence, business or organization is located: Marin County

Section III. Occupational Information

Industry Sector: Life Sciences - Biotech & Pharmaceutical Manufacturing Control System Engineering
 Occupation / Title: President
 Employer: Lucid Automation and Security

| | | |
|--|-----------|------------|
| Employer Address: 20 Galli Drive STE D | | |
| City: Novato | State: CA | Zip: 94949 |
| Employer Phone: 707-564-3840 | | |
| Section IV. Eligibility Certification | | |
| <i>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</i> | | |
| <input checked="" type="checkbox"/> Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N) Name of Business: | | |
| <input type="checkbox"/> Labor Organization Name of Organization: | | |
| <input type="checkbox"/> Joint Labor-Management Apprenticeship Program Name of Organization: | | |
| <input type="checkbox"/> Community-based Organization Name of Organization: | | |
| <input type="checkbox"/> Adult Education and Literacy Name of Provider: | | |
| <input type="checkbox"/> Higher Education Name of Institution: | | |
| <input type="checkbox"/> Economic and Community Development Name of Entity: | | |
| <input type="checkbox"/> State Employment Office | | |
| <input type="checkbox"/> Vocational Rehab Name of Program: | | |
| Section V. | | |
| Describe how your participation on the WDB would advance Workforce Development programs. | | |
| <p>With 20 years of experience in the SF Bay Area Biotech and Pharmaceutical manufacturing industry as an engineering consultant for large Life Science companies, I bring a unique combination of knowledge, connections, and perspective to the workforce preparatory needs of this sector.</p> <p>As a small business owner, I've curated relationships with several educational groups such as the Marin County Educational District, UC Davis, UC Berkley, and Biotech Partners to provide internships for both High School and College students. The internship training program we have developed prepares the students for several possible positions such as engineering, process development, IT, project management, sales, and administrative with large local companies I have worked with: BioMarin, Genentech, AstraZeneca, Bayer, and other Life Science manufacturers.</p> <p>I would welcome an opportunity to broaden the impact of my personal passion to help the next generation of engineers into this field.</p> | | |

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- Must participate in State-mandated ethics training.
- Must disclose financial interests as required by the County Code (Form 700).
- Must report any conflicts of interest as required by the County Code.

I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.



03FEB2022

Signature

Date

Send completed applications to:

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Napa, CA 94559

or email to:
boardadmin@workforcealliancenorthbay.org



WORKFORCE ALLIANCE OF THE NORTH BAY

DRIVING WORKFORCE TALENT

Application for Regional and/or Local Advisory Subcommittee Membership

In accordance with the Workforce Innovation and Opportunity Act of 2014 (WIOA), the Workforce Alliance of the North Bay (WANB) Governing Board has established a Regional Workforce Development Board (WDB) for Napa, Marin, Lake and Mendocino counties which sets policy for and provides oversight of workforce development programs in the four counties. Workforce Development Board members are appointed by the Governing Board to represent specified sectors of the community as listed in Section IV below. The county advisory subcommittees were created to make recommendations to the full WDB that specifically pertain to their respective county's employers and their workforce. There is a sub committee for each of the WANB counties.

Individuals interested in serving on the WDB or workforce committee must complete and submit this application for appointment. This application and the related Nomination Form(s), if any, may be subject to public disclosure.

Please check the appropriate box:

- ☐ Regional Workforce Development Board (WDB) Membership
☒ Advisory Subcommittee for MARIN county Membership
☒ Renew Membership (if your information hasn't changed please fill out only Section I. and sign the form)
☐ Update Information

Section I. Personal Information

First Name: Jaemi Last Name: Naish M.I.:

Section II. County / Location

Provide the county in which your residence, business or organization is located: MARIN

Section III. Occupational Information

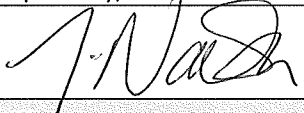
Industry Sector: Adult Education - Education
 Occupation / Title: Director
 Employer: Tamapais Union High School District

| | | |
|--|-----------|------------|
| Employer Address: 375 Doherty Dr. | | |
| City: Larkspur | State: CA | Zip: 94939 |
| Employer Phone: (415) 945-3780 | | |
| Section IV. Eligibility Certification | | |
| <p>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</p> | | |
| <input type="checkbox"/> Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input type="checkbox"/> Y <input type="checkbox"/> N) Name of Business: | | |
| <input type="checkbox"/> Labor Organization Name of Organization: | | |
| <input type="checkbox"/> Joint Labor-Management Apprenticeship Program Name of Organization: | | |
| <input type="checkbox"/> Community-based Organization Name of Organization: | | |
| <input checked="" type="checkbox"/> Adult Education and Literacy Name of Provider: Tamalpais Adult School | | |
| <input type="checkbox"/> Higher Education Name of Institution: | | |
| <input type="checkbox"/> Economic and Community Development Name of Entity: | | |
| <input type="checkbox"/> State Employment Office | | |
| <input type="checkbox"/> Vocational Rehab Name of Program: | | |
| Section V. | | |
| Describe how your participation on the WDB would advance Workforce Development programs. | | |
| <p>Tamalpais Adult School ^(TAS) & programs provides adult & family literacy services to historically underserved learners across Marin County. The vision & mission of TAS is to support adults into family sustaining careers & training, learn English & transition to higher education.</p> | | |

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- **Must comply with the County's Ethics Ordinance.**
- **Must participate in State-mandated ethics training.**
- **Must disclose financial interests as required by the County Code (Form 700).**
- **Must report any conflicts of interest as required by the County Code.**

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| | |
|---|-----------|
|  | 4-25-2022 |
| Signature | Date |

Send completed applications to:

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or email to:
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WORKFORCE ALLIANCE OF THE NORTH BAY

DRIVING WORKFORCE TALENT

Application for Regional and/or Local Advisory Subcommittee Membership

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Individuals interested in serving on the WDB or workforce committee must complete and submit this application for appointment. This application and the related Nomination Form(s), if any, may be subject to public disclosure.

Please check the appropriate box:

- ☐ Regional Workforce Development Board (WDB) Membership
☒ Advisory Subcommittee for Marin county Membership
☐ Renew Membership (if your information hasn't changed please fill out only Section I. and sign the form)
☐ Update Information

Section I. Personal Information

First Name: Niles Last Name: Smith M.I.: V

[Redacted Address Block]

Email Address:

Section II. County / Location

Provide the county in which your residence, business or organization is located:

Section III. Occupational Information


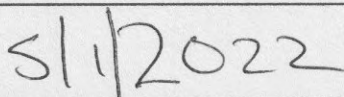
Industry Sector: Technology Services
 Occupation / Title: Sales and Account Management / Associate Partner
 Employer: IBM

| | | | |
|--|---|--------|-------|
| Employer Address: | 425 Market Street | | |
| City: | San Francisco | State: | CA |
| | | Zip: | 94105 |
| Employer Phone: | 415-545-2000 / 800 426- 33 4968 | | |
| Section IV. Eligibility Certification | | | |
| <p>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</p> | | | |
| <input checked="" type="checkbox"/> | Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N) Name of Business: IBM | | |
| <input type="checkbox"/> | Labor Organization Name of Organization: | | |
| <input type="checkbox"/> | Joint Labor-Management Apprenticeship Program Name of Organization: | | |
| <input type="checkbox"/> | Community-based Organization Name of Organization: | | |
| <input type="checkbox"/> | Adult Education and Literacy Name of Provider: | | |
| <input type="checkbox"/> | Higher Education Name of Institution: | | |
| <input type="checkbox"/> | Economic and Community Development Name of Entity: | | |
| <input type="checkbox"/> | State Employment Office | | |
| <input type="checkbox"/> | Vocational Rehab Name of Program: | | |
| Section V. | | | |
| Describe how your participation on the WDB would advance Workforce Development programs. | | | |
| <p>I am committed to furthering workforce development, upward mobility, and advancing equity. As a long-time professional in technology, I believe my experience in the sector and network can help further ideas and open doors. And given my passion for WFD and homebase of San Rafael, I'm excited to support the important work of the Advisory Subcommittee of Marin County.</p> | | | |

Please be advised that members of the Workforce Development Board:

- May be required to take an Oath of Office.
- Must comply with the County's Ethics Ordinance.
- Must participate in State-mandated ethics training.
- Must disclose financial interests as required by the County Code (Form 700).
- Must report any conflicts of interest as required by the County Code.

I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.

| | |
|---|--|
|  |  |
| Signature | Date |

Send completed applications to:

Workforce Alliance of the North Bay
P.O. BOX 247
Napa, CA 94559

or email to:

boardadmin@workforcealliancenorthbay.org



Application for Regional and/or Local Advisory Subcommittee Membership

In accordance with the Workforce Innovation and Opportunity Act of 2014 (WIOA), the Workforce Alliance of the North Bay (WANB) Governing Board has established a Regional Workforce Development Board (WDB) for Napa, Marin, Lake and Mendocino counties which sets policy for and provides oversight of workforce development programs in the four counties. Workforce Development Board members are appointed by the Governing Board to represent specified sectors of the community as listed in Section IV below. The county advisory subcommittees were created to make recommendations to the full WDB that specifically pertain to their respective county's employers and their workforce. There is a sub committee for each of the WANB counties.

Individuals interested in serving on the WDB or workforce committee must complete and submit this application for appointment. This application and the related Nomination Form(s), if any, may be subject to public disclosure.

Please check the appropriate box:

- ☐ Regional Workforce Development Board (WDB) Membership
☒ Advisory Subcommittee for Mendocino county Membership
☐ Renew Membership (if your information hasn't changed please fill out only Section I. and sign the form)
☐ Update Information

Section I. Personal Information

First Name: Laura

Last Name: Liberty

M.I.: E.

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted] Phone:

Email Address:

[Redacted]

Section II. County / Location

Provide the county in which your residence, business or organization is located: Mendocino County

Section III. Occupational Information

Industry Sector: Manufacturing

Occupation / Title: Human Resources and Communications Manager

Employer: Factory Pipe, LLC

| | | |
|--|-----------|------------|
| Employer Address: 1307 Masonite Rd. | | |
| City: Ukiah | State: CA | Zip: 95482 |
| Employer Phone: 707-463-1322 | | |
| Section IV. Eligibility Certification | | |
| <i>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</i> | | |
| <input checked="" type="checkbox"/> Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N) <i>Name of Business:</i> Factory Pipe, LLC | | |
| <input type="checkbox"/> Labor Organization <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Joint Labor-Management Apprenticeship Program <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Community-based Organization <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Adult Education and Literacy <i>Name of Provider:</i> | | |
| <input type="checkbox"/> Higher Education <i>Name of Institution:</i> | | |
| <input type="checkbox"/> Economic and Community Development <i>Name of Entity:</i> | | |
| <input type="checkbox"/> State Employment Office | | |
| <input type="checkbox"/> Vocational Rehab <i>Name of Program:</i> | | |
| Section V. | | |
| Describe how your participation on the WDB would advance Workforce Development programs. | | |
| <p>As a human resources manager, my participation on the WDB would advance Workforce Development programs by providing a perspective on what HR Managers need in order to successfully implement these programs. I also believe that my unique experience as a manufacturing professional can provide insight as to the type of skills necessary for living wage jobs in the North Bay.</p> | | |

Please be advised that members of the Workforce Development Board:

- May be required to take an Oath of Office.
- Must comply with the County's Ethics Ordinance.
- Must participate in State-mandated ethics training.
- Must disclose financial interests as required by the County Code (Form 700).
- Must report any conflicts of interest as required by the County Code.

I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.

| | |
|--------------------------------|-----------------|
| | |
| Signature <i>Laura Liberty</i> | Date 05/09/2022 |

Send completed applications to:

Workforce Alliance of the North Bay
P.O. BOX 247
Napa, CA 94559

or email to:
boardadmin@workforcealliancencorthbay.org



Application for Regional and/or Local Advisory Subcommittee Membership

In accordance with the Workforce Innovation and Opportunity Act of 2014 (WIOA), the Workforce Alliance of the North Bay (WANB) Governing Board has established a Regional Workforce Development Board (WDB) for Napa, Marin, Lake and Mendocino counties which sets policy for and provides oversight of workforce development programs in the four counties. Workforce Development Board members are appointed by the Governing Board to represent specified sectors of the community as listed in Section IV below. The county advisory subcommittees were created to make recommendations to the full WDB that specifically pertain to their respective county's employers and their workforce. There is a sub committee for each of the WANB counties.

Individuals interested in serving on the WDB or workforce committee must complete and submit this application for appointment. This application and the related Nomination Form(s), if any, may be subject to public disclosure.

Please check the appropriate box:

- ☐ Regional Workforce Development Board (WDB) Membership
☒ Advisory Subcommittee for Mendocino county Membership
☐ Renew Membership (if your information hasn't changed please fill out only Section I. and sign the form)
☐ Update Information

Section I. Personal Information

First Name: Dorianne Last Name: Tanaka M.I.: D.
 Home Address: [REDACTED] City: [REDACTED] Zip: [REDACTED]
 Mailing Address: [REDACTED] City: [REDACTED] Zip: [REDACTED]
 Cell Phone: [REDACTED] Alternate Phone: [REDACTED]
 Email Address: [REDACTED]

Section II. County / Location

Provide the county in which your residence, business or organization is located: Mendocino

Section III. Occupational Information


Industry Sector: Disability Services/Employment
 Occupation / Title: Executive Director
 Employer: Ukiah Valley Association for Habilitation

| | | |
|---|--|----------------------|
| Employer Address: | 990 S. Dora St. | |
| City: | Ukiah | State: CA Zip: 95482 |
| Employer Phone: | 707-468-8824 | |
| Section IV. Eligibility Certification | | |
| <p><i>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</i></p> | | |
| <input type="checkbox"/> | Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input type="checkbox"/> Y <input type="checkbox"/> N) Name of Business: | |
| <input type="checkbox"/> | Labor Organization Name of Organization: | |
| <input type="checkbox"/> | Joint Labor-Management Apprentice Program Name of Organization: | |
| <input checked="" type="checkbox"/> | Community-based Organization Name of Organization: | |
| <input type="checkbox"/> | Adult Education and Literacy Name of Provider: | |
| <input type="checkbox"/> | Higher Education Name of Institution: | |
| <input type="checkbox"/> | Economic and Community Development Name of Entity: | |
| <input type="checkbox"/> | State Employment Office | |
| <input type="checkbox"/> | Vocational Rehab Name of Program: | |
| Section V. | | |
| Describe how your participation on the WDB would advance Workforce Development programs. | | |
| <p>The membership renewal of my predecessor at UVAH, Pam Jensen, was approved, but she has since retired.</p> <p>I would like to take her place, as UVAH continues to work to build partnerships with businesses in the community, providing workforce training, meeting the needs of local business, and expanding opportunities for the workforce.</p> | | |

Please be advised that members of the Workforce Development Board:

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- Must participate in State-mandated ethics training.
- Must disclose financial interests as required by the County Code (Form 700).
- Must report any conflicts of interest as required by the County Code.

I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.

| | |
|---|----------|
|  | 12-29-21 |
| Signature | Date |
| <p>Send completed applications to:</p> <p>Workforce Alliance of the North Bay P.O. BOX 247 Napa, CA 94559</p> <p>or email to: boardadmin@workforcealliancencorthbay.org</p> | |



WORKFORCE ALLIANCE OF THE NORTH BAY

DRIVING WORKFORCE TALENT

Application for Regional and/or Local Advisory Subcommittee Membership

In accordance with the Workforce Innovation and Opportunity Act of 2014 (WIOA), the Workforce Alliance of the North Bay (WANB) Governing Board has established a Regional Workforce Development Board (WDB) for Napa, Marin, Lake and Mendocino counties which sets policy for and provides oversight of workforce development programs in the four counties. Workforce Development Board members are appointed by the Governing Board to represent specified sectors of the community as listed in Section IV below. The county advisory subcommittees were created to make recommendations to the full WDB that specifically pertain to their respective county's employers and their workforce. There is a sub committee for each of the WANB counties.

Individuals interested in serving on the WDB or workforce committee must complete and submit this application for appointment. This application and the related Nomination Form(s), if any, may be subject to public disclosure.

Please check the appropriate box:

- ☐ Regional Workforce Development Board (WDB) Membership
☒ Advisory Subcommittee for Lake&Mendocino county Membership
☐ Renew Membership (if your information hasn't [REDACTED] out only Section I. and sign the form)
☐ Update Information

Section I. Personal Information

First Name: Jolee Last Name: White M.I.:
 [REDACTED] [REDACTED] [REDACTED] [REDACTED]
 [REDACTED] same [REDACTED] [REDACTED]
 [REDACTED] [REDACTED] [REDACTED] [REDACTED]
 [REDACTED] [REDACTED]

Section II. County / Location

Provide the county in which your residence, business or organization is located: Adventist Health has facilities in CA, OR, WA, HI. Local facilities include Napa, Lake, Mendocino counties

Section III. Occupational Information

Industry Sector: Health Care
 Occupation / Title: Talent Acquisition Manager
 Employer: Adventist Health

| | | |
|--|-----------|------------|
| Employer Address: 230-B Hospital Drive | | |
| City: Ukiah | State: CA | Zip: 95463 |
| Employer Phone: 707-963-6588 | | |
| Section IV. Eligibility Certification | | |
| <p><i>Indicate below each membership category for which you are applying. You may mark more than one category but must certify your qualifications for each category for which you are applying. A completed Nomination Form must accompany applications for Business Member, Labor Organization, Adult Education and Literacy and/or Higher Education from an appropriate nominating organization.</i></p> | | |
| <input checked="" type="checkbox"/> Business Member (Do you represent a "small business" as defined by the U.S. Small Business Administration? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N) <i>Name of Business:</i> | | |
| <input type="checkbox"/> Labor Organization <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Joint Labor-Management Apprenticeship Program <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Community-based Organization <i>Name of Organization:</i> | | |
| <input type="checkbox"/> Adult Education and Literacy <i>Name of Provider:</i> | | |
| <input type="checkbox"/> Higher Education <i>Name of Institution:</i> | | |
| <input type="checkbox"/> Economic and Community Development <i>Name of Entity:</i> | | |
| <input type="checkbox"/> State Employment Office | | |
| <input type="checkbox"/> Vocational Rehab <i>Name of Program:</i> | | |
| Section V. | | |
| Describe how your participation on the WDB would advance Workforce Development programs. | | |
| <p>Adventist Health employees more than 1300 local residents in 3 hospitals and more than 30 patient service facilities in our hospitals and clinics in Ukiah, Willits and Ft. Bragg.</p> <p>As the Talent Acquisition Manager for these areas I and my team collaborate to provide local and system strategy planning, sourcing, recruitment and hiring of positions at all levels.</p> <p>I anticipate that my participation in this sub-committee will strengthen the communication and collaboration between Adventist Health, the WANB, Career Point centers and potentially Bright Futures programs. We brings job opportunities, and equally important, opportunities for local residents to begin and grow their health care career in their local communities. Our involvement with the WANB and subcommittee will expand the two way conduit to hire and retain residents in the counties served by WANB and it's programs</p> | | |

Please be advised that members of the Workforce Development Board:

- **May be required to take an Oath of Office.**
- **Must comply with the County's Ethics Ordinance.**
- **Must participate in State-mandated ethics training.**
- **Must disclose financial interests as required by the County Code (Form 700).**
- **Must report any conflicts of interest as required by the County Code.**

I hereby certify that all statements in this Application are true and complete to the best of my knowledge and execute this Application under penalty of perjury. I further certify that if I am appointed, I will serve fairly, impartially, and to the best of my ability.

| | |
|------------------|-------------|
| Jolee White | 4/20/22 |
| Signature | Date |

Send completed applications to:

Workforce Alliance of the North Bay
P.O. BOX 247
Napa, CA 94559

or email to:
boardadmin@workforcealliancencorthbay.org

BOARD LETTER II.E



TO: REGIONAL BOARD
FROM: STAFF
SUBJECT: BOARD LETTER II.E – LAKE AND MENDOCINO COUNTIES TRANSFER OF FUNDS
DATE: JUNE 9, 2022
CC: FILE

Arbor E&T, LLC dba Equus Workforce Solutions has requested a transfer funds from Dislocated Worker formula to Adult formula in Lake County and Mendocino County in the following amounts:

- A. CareerPoint Lake has requested to transfer \$52,232 from the dislocated worker formula funding to the adult program formula funding due to an increased number of adults coming in for services.
- B. CareerPoint Mendocino has requested to transfer \$76,534 the dislocated worker formula funding to the adult program formula funding due to an increased number of adults coming in for services

Staff has reviewed the budgets in Lake and Mendocino counties and have determined they are on track to underspend their Dislocated Worker training funds and overspend their Adult training funds. Approving this transfer would allow Equus Workforce Solutions to better utilize their awarded allocation in each county.

Staff Recommendation: Approve the transfer of \$52,232 from Dislocated Worker to Adult funding in Lake County and \$76,534 from Dislocated Worker to Adult funding in Mendocino County for a total transfer of \$128,766 from Dislocated Worker to Adult funding.

BOARD LETTER III.A



TO: REGIONAL BOARD
FROM: EXECUTIVE DIRECTOR
SUBJECT: BOARD LETTER III.A– NORTH BAY EMPLOYMENT CONNECTION (NBEC) STUDY REPORT
DATE: JUNE 9, 2022
CC: FILE

BACKGROUND:

The North Bay Employment Connection (NBEC), the Workforce Development Boards for Sonoma, Solano, Lake, Marin, Mendocino and Napa Counties, commissioned a study from Economic Forensics and Analytics, Inc. (EFA) of the six counties and their pre-pandemic trends and potential forecasts for regional employers' demand for workers, occupational demand for specific types of jobs, and the skills most needed as a result of demand in those occupations.

This study provides data, forecasts, and analyses for workforce development in the North Bay, California. the local changes due to the pandemic is essential for planning the future in the NBEC region. This study also considered what communities are more vulnerable to slower changes in economic opportunity than others and how communities of color (BIPOC) were affected by the pandemic and in what ways workforce development opportunities exist to help these communities. Specific middle-skill opportunities are provided, as well as STEM and soft skills needed for workforce development to proceed in parallel with economic development and to keep up with the changes forecasted through 2025.

STAFF RECOMMENDATION

Listen to this report by Rob Eyler and Jon Haveman from EFA and use it to make informed decisions about workforce issues moving forward.

BOARD LETTER III.B



TO: REGIONAL BOARD
FROM: EXECUTIVE DIRECTOR
SUBJECT: BOARD LETTER III.B- CAREERPOINT NORTH BAY MEMORANDUM OF UNDERSTANDING
DATE: JUNE 9, 2022
CC: FILE

BACKGROUND:

In order to establish a high quality American Job Center of California (AJCC) delivery systems and enhance collaboration among partner programs, WIOA requires Local Boards to develop MOUs with all AJCC required partners within their Local Workforce Development Area (Local Area). These MOUs serve as a functional tool as well as visionary plan for how the Local Board and AJCC partners will work together to create a unified service delivery system that best meets the needs of their shared customers. For the initial negotiation process of these MOUs, the State separated the development process in two distinct phases and three separate Directives. Phase I Directive addressed service coordination and collaboration among all AJCC partners. The Phase II Directive addressed how to sustain the unified system through the use of resource sharing and joint cost funding. These Directives laid the groundwork for Local Areas to execute a MOU(s) in order to meet DOL requirements and included key elements of an MOU as outlined in TEGL 16-16. All MOUs were required to contain assurances that the MOU would be reviewed and updated every three years with an annual review of and, if necessary, amendments to the Infrastructure Funding Agreements (IFA) and Other System Costs Budget. This Directive consolidates the three previous MOU Directives and provided guidance for Local Areas in reviewing and updating their AJCC MOUs and IFAs.

The WANB as the local board for Marin, Napa, Lake and Mendocino has completed a network AJCC MOU that will reflect a coalition of willing partners that contribute to the AJCC. Collection of the required signatures from AJCC partners is underway. Today's action would approve the draft MOU and empower the Executive Director to make necessary changes to ensure adherence to State Directives and Federal guidance. It would also empower the Regional Chair to sign the final MOU on behalf of the Board.

The 2022 Draft CareerPoint Network MOU can be found here: <https://www.workforcealliancencorthbay.org/policies-notices/> *Scroll to Memoranda of Understanding (MOU) / Draft 2022 CareerPoint MOU

STAFF RECOMMENDATION

Approve network MOU, empower Executive Director to make necessary amendments and empower the Regional Workforce Development Board Chair to sign.

BOARD LETTER III.C



TO: REGIONAL WORKFORCE DEVELOPMENT BOARD
FROM: STAFF
SUBJECT: BOARD LETTER III.C - ONE-STOP OPERATIONS
DATE: JUNE 9, 2022
CC: FILE

Among the several responsibilities of the Workforce Alliance Regional Workforce Development Board, is its responsibility to assist the Governing Board *“conduct program oversight of local youth, and adult training activities and the one-stop delivery system.”*

At today’s meeting, the Regional Board will hear a presentation from Management representatives of WIOA Career Services Contractor – Equus Workforce Solutions. Equus is wrapping up the first year of operations in each of the four counties and will provide an overview of their efforts, successes, and challenges in Year One of the contract. Board members will have an opportunity to ask questions and suggest recommendations for Year Two of the contract year.

STAFF RECOMMENDATION

Accept presentation from WIOA Career Services Provider – Equus Workforce Solutions.

BOARD LETTER III.D



TO: REGIONAL BOARD
FROM: EXECUTIVE DIRECTOR
SUBJECT: BOARD LETTER III.D- ECOLOGICAL WORKFORCE INITIATIVE, ECOLOGY CORPS
DATE: JUNE 9, 2022
CC: FILE

BACKGROUND:

WANB has discovered that there is a need for highly trained trade workers who understand the ecological needs on environmental restoration job sites, including working within permitting constraints and basic identification of protected plants and animals. With Workforce Accelerator resources the Workforce Alliance of the North Bay partnered with Conservation Corps North Bay, and construction and open space management industry partners to pilot an Ecological Workforce training program with eight north bay participants in the summer of 2021. The partnership is called the Ecological Workforce Initiative. The Ecological Workforce will help empower our future workforce with job readiness skills. The job outlook is encouraging. The field is growing, the specialized knowledge and skills are in demand, and the jobs tend to pay sustainable wages.

The Ecological Workforce Initiative will be offering two Ecology Corps program cohorts this summer, starting with a Napa/Marin cohort in July, and a Lake/Mendocino cohort in August. This 8-week earn-and-learn training model is based on a partnership with an Employer of Record and various Worksite Sponsors. The Employer of Record hires the crewmembers, trains and supervises them, and provides tools, equipment and transportation to/from the worksites. The Worksite Sponsors are entities with ecological restoration projects and a need for our crews. Collectively they pay for half of the training costs while WIOA pays for the other half.

At this time, we are recruiting for ecological workforce participants and staff would like to hear from board members regarding potential recruitment opportunities.

STAFF RECOMMENDATION

Accept presentation by WANB staff and help promote the program within your networks.