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CITY CLERK, FRESNO CA **MAYOR LEE BRAND**

**NOTIFICATION OF APPOINTMENT BY MAYOR
TO BOARD OR COMMISSION**

TO: City Council
THROUGH: Yvonne Spence, City Clerk
BY: Lee Brand, Mayor

_____ **Reappointment**
X _____ **New Appointment**

Name of person replaced:

Name: Edward S. Saliba

Address:



Home Phone:



Work Phone:



Appointed to: Fresno Madera Area Agency on Aging Board

Term: Through 01/08/2018

City Council Agenda 2/16/17



APPLICATION FOR APPOINTMENT TO BOARD OR COMMISSION

Resume or letters of recommendation may be attached.

Applicants may be required to live within the Fresno City limits. I reside in Council District No. 6

Name: Edward S. Saliba Hm. Phone: [REDACTED] Wk. Phone: [REDACTED]

Home Address: [REDACTED] Zip: 93720

Work Address: [REDACTED] Zip: 93706

E-Mail: edwardsaliba@sbcglobal.net Occupation/Employer: Administrator, Valley ADHCC, Yrs 15 Months

Educational Background, Schools Attended, Degrees and Certifications: B.A. Degree, in Business Administration, at American University of Beirut, Lebanon/ Post Graduate course at California State Fullerton, Fullerton, CA

Professional and Community Affiliations: FMAAA Advisory Board, Co-Chair of Health Net Insurance State wide policy committee, Chairman of various religious boards and committee through the church.....Etc.

For what Board or Commission are you applying? Board of Fresno Madera Agency on Aging

Briefly explain why you are interested in serving on this Board(s) or Commission(s): My passion and desire to use my talent in making a different in the my community I live and work I and beyond

Provide 3 Personal/Professional References. Provide name, address, and phone number where they may be reached during the day.

Mr. Tim Orman, [REDACTED] Mr. Jeff Melikian [REDACTED] Pastor Lou Paradise [REDACTED]

Do you or an immediate family member have any professional or financial relationships that may present a potential conflict of interest for this board, commission or similar body? NO

I declare under penalty of perjury the above information is true and correct.

Dated: 2/9/17 Applicant: [REDACTED]
Signature

Return completed, signed application to the City Clerk's Office, 2600 Fresno Street, Room 2133, Fresno, CA 93721-3603 or FAX to (559) 488-1005. Your application will be kept on file for two years, please re-file after that time if you are still interested in serving.

FOR OFFICE USE ONLY: Date referred to Mayor _____ Date referred to Councilmember _____