



Local Child Care Planning Council of Colusa County

"Working together to build brighter futures for children"

Name:		
Home Address:	City:	Zip:
Agency:	Title:	
Business Address:	City:	Zip:
Day Phone:	Fax:	E-Mail:

Categories for Appointment

Please indicate which appointment category you are applying for:

- ☐ **I. Consumer of Child Care Services** (using child care or have used it within the past 36 months)
Are you currently receiving child care? _____ Date last used: _____
- ☐ **II. Child Care Provider** – please indicate the type of care you provide:
- ☐ Licensed Child Care Provider.
 - ☐ Licensed, Publicly Funded Child Care Center.
 - ☐ Licensed, Private for Profit or Private Non Profit Child Care Center.
 - ☐ License Exempt Child Care Provider.
- ☐ **III. Community Representative** (excluding agencies that contract with CDE to provide child care and development services)
Organization: _____ Service Area: _____
- ☐ **IV. Public Agency Representative** (including city, county, and local education agencies)
Agency: _____
- ☐ **V. Discretionary Category** – Please describe:

Geographic, Ethnic, and Cultural Diversity Representation

AB1542 states "Every effort shall be made to ensure that the ethnic, racial, geographic composition of the Local Planning Council is reflective of the ethnic, racial, and geographic distribution of the population of the county."

Please indicate your ethnic origin (optional):

- ☐ White (includes Indo-European) ☐ Black (includes African, Jamaican, Trinidadian, & West Indian)
☐ Hispanic (includes Mexican, Puerto Rican, Cuban, Spanish, and Latin American)
☐ Asian or Pacific Islander (includes Japanese, Chinese, Korean, or Vietnamese)
☐ American Indian or Alaskan Native ☐ Filipino ☐ Other: _____

Members are expected to attend regular monthly meetings held on the fourth (4th) Tuesday of every other month. Additional meetings may be scheduled for training, committees, and Council business. Are you willing to commit to regular participation given this schedule? ☐ Yes ☐ No

[illegible]

Local Child Care Planning Council of Colusa County
c/o Colusa County Office of Education
345 Fifth Street, Suite B
Colusa, CA 95932
Phone: 530-458-0350 ext. 10306
Fax: 530-458-0310

Council recommends appointment? ☐ Yes ☐ No Date: _____

Board of Supervisors Approval Date: _____

County Superintendent's Approval Date: _____

County Superintendent's Signature: _____