



## Consumer and Family Member Employment Work Group Application

1. Name and contact information:

- Name \_\_\_\_\_
- Mailing Address \_\_\_\_\_
- Home Phone \_\_\_\_\_ Cell Number \_\_\_\_\_ Fax # \_\_\_\_\_
- E-mail address \_\_\_\_\_

2. Your affiliation:

- |   |  |
|---|--|
| <input type="checkbox"/> Consumer or Family Organization  | <input type="checkbox"/> County Mental Health Provider   |
| <input type="checkbox"/> Pool of Consumer Champions       | <input type="checkbox"/> Contract CBO Mental Health Provider   |
| <input type="checkbox"/> Family Education Resource Center | <input type="checkbox"/> ACBHCS Peer Provider, i.e. Consumer<br>Provider/Parent Partner/Family Partner |

3. Which stakeholder group would you represent on the work group?

- Consumer                       Family member
- Provider in county or contract community-based organization setting.

4. Applicants can apply for a one year or two year term on the work group. Individuals who are selected to participate on the work group can reapply when their initial term is complete. For example, an applicant who is selected for a one year term can reapply for another one year term or a two year term. Which term are you applying for?

- One Year                       Two Year

5. Please write a short, one paragraph response to the following two questions:

Describe your experience with consumer and family member employment activities and why you are interested in serving on this work group.

6. Describe your experience participating in collaborative processes that involve a variety of stakeholders. Please provide a specific example.

7. Please submit your application to Toni Tullys, ACBHCS Workforce Development Manager. Applications must be received on or before **December 9, 2009** and can be submitted in the following ways:

By email: [ttullys@acbhcs.org](mailto:ttullys@acbhcs.org)

By fax: (510) 639-1346

By County QIC Code: 22711

By mail: Toni Tullys  
Workforce Development Manager, ACBHCS  
2000 Embarcadero Cove, Suite 201  
Oakland, CA 94606

For questions, contact Toni Tullys, by email at [ttullys@acbhcs.org](mailto:ttullys@acbhcs.org) or by phone at (510) 639-1209.