



APPLICATION FOR BOARD MEMBERSHIP

Return this application to:
Yuba County Community Services Commission
950 Tharp Road, Suite 1303, Yuba City, CA 95993
Or email to jslade@ysedc.org
For more information, contact Jackie Slade at
(530) 751-8555

Community Action Agencies are designated and funded to reduce poverty in the communities they serve. Every service, activity, and role funded under Community Action must answer the question: "How does this move the needle on helping families out of poverty?"

Yuba County Community Services Commission (YCCSC) is tasked with maintaining a Community Action Board that operates to assist the low-income residents of Yuba County. The Board is composed of fifteen members representing three sectors: low-income, public, and private. Each member makes a commitment to represent the needs of the particular part of the community they represent.

NAME _____

MAILING ADDRESS _____

RESIDENCE ADDRESS _____ SUPERVISORIAL DISTRICT _____

HOME TELEPHONE _____ BUSINESS TELEPHONE _____ CELL _____

EMAIL _____

OCCUPATION/PROFESSION/EMPLOYER _____

Which sector of the community do you wish to represent?

Public Sector Representative Must be a Yuba County Board of Supervisor or their appointee, a Yuba County resident and will serve the length of term of the Supervisor.

Private Sector Representative Must be a Yuba County resident, at least 18 years of age and will serve a 4-year term.

Low Income Representative Must be living in poverty or be from an organization that represents/serves low-income groups, a Yuba County resident and will serve a 4-year term. In addition, must complete the Low-Income Sector Application Supplement with petition.

REASONS FOR WISHING TO SERVE ON THIS BOARD _____

QUALIFICATIONS FOR SERVING ON THIS BOARD (if a low-income rep, make sure to indicate your qualifications to represent the low income)

LIST ANY PUBLIC POSITIONS CURRENTLY HELD _____

LIST OTHER BOARDS/COMMITTEES/COMMISSIONS ON WHICH YOU CURRENTLY SERVE, OR HAVE PREVIOUSLY SERVED _____

I HEREBY DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I understand that if I am affiliated with an agency currently allocated or seeking Community Service Block Grant (CSBG) funds, I will be unable to participate in any part of YCCSC's process involving the allocation of CSBG funds during the course of my board term, if selected.

SIGNATURE _____ DATE _____



**BOARD OF DIRECTORS
LOW-INCOME SECTOR APPLICATION SUPPLEMENT**

Name of Board Applicant: _____

Yuba County Community Services Commission (YCCSC) Board of Directors representatives from the Low-Income sector must be a Yuba County resident, at least 18 years of age, either be living in poverty or be from an organization that represents low-income groups. They must also be nominated by a petition signed by at least 10 low-income residents of Yuba County.

Which do you represent? From an organization that represents low-income groups
 Living in Poverty (Circle your household size, then check the numbers below to confirm that your household income is at or below the income guidelines.)

Household size	1	2	3	4	5	6	7	8
Monthly income at or below	\$2,608	\$3,525	\$4,442	\$5,358	\$6,275	\$7,162	\$8,108	\$9,025

SOURCE: Federal Register, Department of Health and Human Services January 2025

As a Low-Income Sector Representative, you MAY NOT be an employee or relative of an employee of the California Department of Community Services and Development or an employee of the Federal Department of Health and Human Services. Do you meet the conditions in the above statements? Yes No

If NO, please explain: _____

Are you an employee, officer or immediate relative to an employee of an organization receiving Community Services Block Grant funds through direct contract or subcontract? Yes No

If YES, please explain: _____

PETITION PROCESS:

Representatives of the Low-Income Sector are required to submit a petition signed by at least ten (10) persons whose household income does not exceed the poverty guidelines. The attached Petition for Candidacy, that includes the current Federal Poverty Guidelines for CSBG, should be used for this purpose.

SELECTION PROCEDURES:

Each representative of the Low-Income Sector shall be chosen in accordance with democratic procedures that ensure representation of people in poverty in the County of Yuba.

The selection procedures shall be as follows:

- (a) The need for qualified candidates to represent the people in poverty on the YCCSC Board of Directors shall be publicized on the YCCSC social media pages, press releases to local and neighborhood publications, distribution of fliers to organizations that predominately serve the low-income, etc.

- (b) Publication of Low-Income Sector vacancies shall be publicized for at least 30 days or until all vacancies are filled.
- (c) Eligible candidates shall be required to submit an Application, a Low- Income Sector Application Supplement and a petition signed by at least ten (10) people in poverty.
- (d) Candidates must be willing to represent the low-income sector, be at least 18 years of age, and be willing and available to commit the time and effort to focus on the duties and responsibilities of the YCCSC Board of Directors.
 - Meet the 3rd Thursday of every other month at 3:00pm for generally one hour
 - Serve for a three-year term
- (e) Candidates cannot be an employee or relative of an employee of the California Department of Community Services and Development or an employee of the Federal Department of Health and Human Services.
- (f) Candidates who are an employee, officer or immediate relative to an employee of an organization receiving Community Services Block Grant funds through direct contract or subcontract must disclose this status in the Application Supplement.
- (g) The Nominations Committee shall screen and interview candidates and make recommendations to the Board of Directors on their qualifications.
- (h) The YCCSC Board of Directors shall vote on candidates in a regular or special Board meeting, and the results of each vote shall be recorded in the minutes of the meeting.

CERTIFICATION:

I certify that the information provided in this application supplement is true and correct to the best of my knowledge.

Print Name

Signature

Date

PETITION FOR CANDIDACY

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Yuba County Community Services Commission currently has a vacancy for a low-income sector seat representing Yuba County’s low-income residents.

(Name of Applicant) _____, a resident of Yuba County, has applied for this opportunity.

By signing your name below you are supporting _____ in his/her candidacy to represent the Low-Income Sector on the Yuba County Community Services Commission (YCCSC) Board of Directors **and certifying that (1) you are a resident of Yuba County (2) you are at least 18 years of age and (3) your household income is at or below the income guidelines indicated below.** (Circle your household size, check numbers directly below that to confirm)

Household size	1	2	3	4	5	6	7	8
Monthly income at or below	\$2,608	\$3,525	\$4,442	\$5,358	\$6,275	\$7,162	\$8,108	\$9,025

SOURCE: Federal Register, Department of Health and Human Services January 2025

Printed Name	Signature	City	Date
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

For more information or any questions, please contact Jackie Slade with Yuba County Community Services Commission at 530-751-8555 or jslade@ysedc.org.