Subject: Online Form Submission #165305 for Snohomish County Boards & Commissions Application Form

Thursday, March 6, 2025 11:10:05 PM



Date:

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Snohomish County Boards & Commissions Application Form

SNOHOMISH COUNTY BOARDS & COMMISSIONS APPLICATION FORM

NOMINEE: Please fill in the	is section
Name of Board/Commission:	Developmental Disabilities Advisory Board
	New Appointment
Snohomish County Council District (Please choose one):	Snohomish County
Name	Amna Jawaid
Home Address	15604 72nd Dr SE
Mailing Address (if different)	Field not completed.
City	Snohomish
State	WA
Zip Code	98296
Telephone (Home)	4253943296
Telephone (Work)	4253943296
Email	amnajawaid@gmail.com
Current Employer	Field not completed.
Occupation	homemaker
Education	Bachelors
Licenses held (if applicable)	Field not completed.

I see this as an opportunity for my own growth, to learn new skills

Why would you like to serve on this board/commission?	and to support meaningful initiatives.
Please explain why you are a qualified candidate, including relevant professional experience, to serve on the board/commission.	I have been in touch with families who have suffered from different forms of disability, and being me on the board gives me a chance to reflect from their perspective. I was also an active volunteer in my kids school and Evergreen Hospital.
Please list community involvement/volunteer activities	PTSA Redmond Elementary School Teachers helper in my kids class Evergreen hospital
How did you learn of this opportunity?	The board member Ms. Shama Farag told me about it.
Do you currently serve on a Snohomish County board or commission?*	No

- *2.03.060SCC Candidates for appointment to county boards or commission must meet the following requirements:
- (1) Possess qualifications for the appointment sought, as shown by the candidate's written documentation and any hearing testimony;
- (2) If a reappointment, demonstrate the continuing benefits of retaining the board member as discussed in the executive's recommendation and a satisfactory attendance record, as determined by adopted criteria of the particular board;
- (3) Reside or work in Snohomish County, or show evidence of special interest in Snohomish County, PROVIDED That a candidate may not be a County employee.

**People joining identified boards and commissions will be required to complete a background check. Boards and commissions identified as subject to requiring background checks include Children's Commission, Community Services Advisory Council, Council on Aging, CDMH (Chemical Dependency and Mental Health Program Advisory Board), Climate Action Advisory, Developmental Disabilities, Evergreen State Fair, Human Rights, Marine Resouces, Performance Audit, and Planning Commission.

By signing this Application Form, Nominee acknowledges that he/she will comply with all county policies, county code, and state law. Nominee also acknowledges that any record, including personal e-mail, prepared, owned, used, or retained by Nominee in the conduct of Board/Commission business is a public record, and

Nominee agrees to produce said records to County upon request. Failure to comply with the above provisions may result in Nominee's removal from Board/Commission.

Signature	Amna Jawaid
Date	03-06-2025
Please attach resume if available and either submit this form or print it and mail to	Field not completed.

Pursuant to the Public Records Act, Chapter 42.56 RCW, records submitted to Snohomish County and County Council are subject to public disclosure. The practice of the council office is to post all meeting and hearing materials to our website to ensure transparency, as well as to assist in facilitating public records requests.

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