

## SNOHOMISH COUNTY BOARDS & COMMISSIONS NOMINATION FORM **INITIATOR: Please fill in this section** County department/agency: Human Services Department Contact person/phone: Wendy Roullier, (425) 388-7236 Name of Board/Commission: Chemical Dependency and Mental Health Program Advisory Board Advisory X Governing Ad Hoc Ongoing Term of Appointment 3-Year Term Commencing upon appointment Mandated Requirements for Appointment\* Representative of Superior Court SNOHOMISH COUNTY BOARDS & COMMISSIONS APPLICATION FORM NOMINEE: Please fill in this section Name of Board/Commission: <u>CDMH Board</u> New appointment: X Reappointment: 1st \_\_\_\_\_ 2nd \_\_\_\_ Ex-Officio Snohomish County Council District (Please choose one): 2 5 Don't Know Name: Jamie Reed Home Address: 4516 116<sup>th</sup> ST NE City: Marysville State: WA Zip: 98271 Mailing Address (if different): Telephone (home): 425 345-9242 (work) 425 388-7865 E-mail: Jamie.Reed@snoco.org Current Employer: Snohomish County Superior Court Occupation: Program Administrator Treatment Courts Education: B.A Law and Justice\_\_\_\_\_ Licenses held (if applicable): Why would you like to serve on this board/commission? To be part of the conversations and advocacy to enhance behavioral health services in Snohomish County.



Please explain why you are a qualified candidate, including relevant professional experience, to serve on the board/commission. I have worked for Superior/Juvenile Court for 26 years. The first 18 years as a juvenile probation counselor working with youth and families in need of behavioral health services. Since 2007 I have worked with the Snohomish County Drug Court Programs (Juvenile, At Risk Youth, Adult, and Family) as a juvenile probation counselor, Supervisor, and currently the Program Administrator. I attend local, state, and national trainings on best practices, trauma informed approach, equity and inclusion, and behavioral health treatment.

*2.03.060SCC - Candidates for appointment to County boards or commission must me following requirements:	eet the
Do you currently serve on a Snohomish County board or commission?* No	
Programs	
How did you learn of this opportunity? Involvement with Adult and Family Treatment C	ourt
youth sports.	
Please list community involvement/volunteer activities. Volunteering at school progra	ms and

- 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.

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.

<u> </u>	Jam		
Signature		Tec	-OV
Date:	9/9/21	)	