

**SNOHOMISH COUNTY BOARDS & COMMISSIONS
NOMINATION FORM**

INITIATOR

County department/agency Human Services Department
Contact person/phone Wendy Roullier, (425) 388-7236
Name of Board/Commission Chemical Dependency/Mental Health Program Advisory Board
Advisory Governing _____ Ad Hoc _____ Ongoing _____
Term of Appointment 3-year term _____ upon appointment _____
Mandated Requirements for Appointment* Member of the Council on Aging _____

NOMINEE – Please fill in this section

Name Dennis Wheeler (See attached nomination form from representing board appt)
New appointment Reappointment: 1st _____ 2nd _____ Ex Officio County
Council District 3
Home Address _____
City _____ State _____ (zip) _____
Mailing Address (if different) _____
Telephone (home) _____ (work) _____
E-mail _____
Employer _____
Occupation _____
Education _____
Licenses held (if applicable) _____
Professional experience relevant to board/commission _____

Community involvement _____

Do you serve on any other Snohomish County board or commission?* _____
Reasons for serving/additional comments _____

(over please)

SNOHOMISH COUNTY BOARDS & COMMISSIONS APPLICATION FORM

NOMINEE: Please fill in this section

Name of Board/Commission: Council On Aging

New Appointment

Snohomish County Council District (Please choose one):

3

Name Dennis L. Wheeler

Home Address 21307 76th Ave. West, #11, Edmonds, WA 98026

Mailing Address (if different) *Field not completed.*

City Edmonds

State WA

Zip Code 98026-7515

Telephone (Home) 425-835-0155

Telephone (Work) 206-601-1170

Email wheelerdennis99@gmail.com

Current Employer Retired

Occupation *Field not completed.*

Education BA Pacific Lutheran University; Post Graduate Studies at Michigan State University

Licenses held (if applicable) *Field not completed.*

Why would you like to serve on this board/commission? I am committed to the safety and security of older adults and those with with disabilities.

Please explain why you are a qualified candidate, including relevant professional experience, to serve on the board/commission.

I served on the Snohomish County Council on Aging from October of 2016 to November of 2019. I was the Chair Person in 2018 and the Senior Center Co-Chair in 2017 and 2019.

Please list community involvement/volunteer activities

Prior to serving on the Council on Aging, I was a volunteer at the AARP Fraud Watch Network from January 2014 to January of 2019. I worked at the National Call Center in Seattle and conducted outreach presentations throughout Pierce, King and Snohomish Counties.

How did you learn of this opportunity?

A county employee, Linda Vizmanos

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.*

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

Dennis Wheeler

Date

November 10, 2020

Please attach resume if
available and either submit
this form or print it and mail
to

Field not completed.