

## Snohomish County Boards & Commissions Application Form

### ***SNOHOMISH COUNTY BOARDS & COMMISSIONS APPLICATION FORM***

NOMINEE: Please fill in this section

Name of Board/Commission: North Sound Mental Health Admin Advisory Board

1st Reappointment

Snohomish County Council District (Please choose one): Don't Know

Name Patricia O'Maley-Lanphear

Home Address

Mailing Address (if different)

City Arlington

State WA

Zip Code 98223

Telephone (Home)

Telephone (Work)

Email



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Current Employer

Retired

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Occupation

Healthcare Consultant/Mental Health  
Professional/SUD Counselor

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Education

Ed.M. in Counseling

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Licenses held (if  
applicable)

LMHP/( other licenses retired)

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Why would you like to  
serve on this  
board/commission?

I feel the participation on the board allows me to advocate for individuals in our community who are struggling with chronic mental health or substance related issues. I also have family member that continues to experience behavioral issues stemming from chronic mental illness. I find working this Board rewarding and a way to give back to my community

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

With over 20+ years experience serving in both MH/SUD positions as well as significant time serving on Snohomish County AOD Board and 1/10th Board for Snohomish County. The blended professional experience as well as my family experience has given me a broad foundation and knowledge of the issues that I can apply to the advocacy functions of the Board.

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Please list community  
involvement/volunteer  
activities

Snohomish County AOD Board for 9 years then returned for a year before Board disbanded. 1/10th Board for the original startup and until term limit on AOD Board and returned in last year to this Board.

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NSBHO ( soon to become NS-ASO) completing first term and seeking a second term at this time.

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How did you learn of this opportunity?

Snohomish County Coordinators Office representative reached out to confirm my interest in continuing on the Advisory Board and requested I complete this form.

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Do you currently serve on a Snohomish County board or commission?\*

Yes

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*\*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.*

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*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,*

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*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.*

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Signature

Patricia O'Maley-Lanphear

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Date

June 2, 2019

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Please attach resume if [Resume.2017.docx](#)  
available and either  
submit this form or print  
it and mail to

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