



## Snohomish County Board of Health Application Form

Pursuant to RCW 70.46.140 and RCW 43.20.300

Please Select the position(s) you are applying for: (Please see full position descriptions at the end of this application\*)

☐ Healthcare Facility Member

☐ Healthcare Provider

☒ Consumer of Public Health

☐ Community Stakeholder

**Applicant: Please fill in this section:**

Name: Julie S. Smith

Home Address: [REDACTED]

City: Everett State: WA Zip: 98204

Mailing Address (if different): N/A

Telephone (cell): [REDACTED] (work) [REDACTED]

(home) [REDACTED]

E-mail: [REDACTED]

Current Employer: Security Tax Services

Occupation: Office Administrator/ Manager

Education/Training: MA, IT Management (current), BAS Business Management,

HR Generalist Certificate, AAS General w/ Vision Care

Certificate, Human Resource Management (WGU), Leadership

Certificate(WGU), Business Skills Certificate (WGU), Strategic



Thinking & Innovation Certificate (WGU), 10+ addtl' professional certs. not listed.

Licenses held (if applicable): N/A

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Why would you like to serve on this board/commission? Representation in Healthcare issues matter. I have a strong connection to the pediatric cancer community and believe Black Men, women, and children are underrepresented in important conversations regarding Healthcare issues that significantly impact them and other minority populations.

Please explain why you are a qualified candidate, including relevant professional experience, to serve on the board/commission. I have spent over 20 years working in healthcare in direct and indirect patient care working with insurance companies and large medical providers and manufacturers of medical equipment. I also have several years of personal experience navigating health systems both with major health issues and as the mother of a 3x cancer survivor. I am invested in the health and wellbein of my community and how we nagivage and gain access to and use the health system at large.

Please list community involvement/volunteer activities. Registered Volunteer with VOA & Everett Gospel Mission, contributor to City Council Meetings

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How did you learn of this opportunity? News article

\_\_\_\_\_

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Do you currently serve on a Snohomish County board or commission?\* No. Currently in the interview/selection process for EVHAB.

Is there anything else that you would like to share about your education or background for this position? \_\_\_\_\_



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Snohomish County Council District (Please choose one):

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**1. Healthcare Facilities**

Healthcare facilities means a facility, clinic, or other setting licensed under Title 18, 70, or 71 RCW in which behavioral or medical diagnosis, care, treatment, or services are provided.

**2. Healthcare Providers**

This category consists of persons practicing or employed in the county who are: Medical ethicists; Epidemiologists; Experienced in environmental public health, such as a registered sanitarian; Community health workers; Holders of master's degrees or higher in public health or the equivalent; Employees of a hospital located in the county.

**3. Consumers of Public Health**

This category consists of county residents who have self-identified as having faced significant health inequities or as having lived experiences with public health-related programs such as: The special supplemental nutrition program for women, infants, and children; the supplemental nutrition program; home visiting; or treatment services. It is strongly encouraged that individuals from historically marginalized and underrepresented communities are given preference. These individuals may not be elected officials and may not have any fiduciary obligation to a health facility or other health agency, and may not have a material financial interest in the rendering of health services

**4. Community Stakeholders**

This category consists of persons representing the following types of organizations located in the county: Community-based organizations or nonprofits that work with populations experiencing health inequities in the county; Active, reserve, or retired armed services members; The business community; or The environmental public health regulated community.



**\*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. Resides 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: Julie L. Smith

Date: 11/27/2022

**Please attach Resume and return to:**

Karen Anderson, Snohomish County Executive Office

3000 Rockefeller Ave., MS 407

Everett, WA 98201-4046

(425) 388-3699 phone (425) 388-3434 fax [county.executive@snoco.org](mailto:county.executive@snoco.org)