LETTER OF INTEREST

IN SERVING AS A MEMBER OF THE

EASTERN SIERRA AREA AGENCY ON AGING (ESAAA) ADVISORY COUNCIL

The ESAAA Advisory Council shall be comprised of nine (9) total members from the service area of Inyo and Mono Counties. At least 50% of the appointed members shall be aged 60 or above, including minority individuals and older individuals residing in rural areas. Cross-generational representation also is encouraged. Members may not be employed by an entity currently in a subcontracting relationship with ESAAA.

Name:	Address:
Home Telephone:	Mobile Telephone:
E-mail:	Date:
The following information will be used to ensure co California Code of Regulations and the California D Age: 60 or over 🗌 Under 60 🗍	ompliance with the requirements of the Older Americans Act, the epartment of Aging.
Ethnicity (Please check only one): African American American Indian or Alas Caucasian/White Hispanic or Latino Native Hawaiian or Pacific Islander	ska Native Asian Multiracial Other:
 (Please check all that apply): Low income older adults Disabled persons Supportive services provider Health care provider Family caregiver defined as either (1) an adult home and community care to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent or set to an older individual organic brain dysfunction; or (2) a grandparent organic brain dysfunctic brain dysfunction; or	/voluntary sectors

Please sign here:

Please return completed form to: Eastern Sierra Area Agency on Aging 163 May Street Bishop, CA 93514 Phone: (760) 873-3305 Fax: (760) 873-6505