Attachment A
Application for appointment and background information for City of Stockton Boards, Submit Date: Apr 14, 2025
Commissions, and Committees

Profile					
Email Address					
Patricia First Name	Barrett  Last Name				
Street Address				Suite or Apt	
Stockton City				CA State	Postal Code
Ethnicity					
Gender					
If selected "Other," plea	se specif	y.			
Latinx, Sub White					
What district do you live	e in? *				
✓ District 6					
Primary Phone	Alternate F	Phone			
The City of Stockton use regarding your application				od of comn	nunication
⊙ Yes ○ No					
If you have checked "No	", please	identify how	you pre	fer to be c	ontacted:
n/a					
Employer	Job Title			Occupation	
Employer Address					

Committee?	
⊙ Yes ○ No	
If yes, please list	
Mayor's Roundtable on ADA Water Advisory Group	
Which Boards would you like to apply for?	
Water Advisory Group: Submitted	
Question applies to Climate Action Plan Advisory Committee NOTE: This Board requires membership with one of the following none, please remove board from your application. Do you activel any of the following interest groups? Select all that apply. *	
<ul> <li>✓ Environmental</li> <li>✓ Non-Profit Community Organization</li> </ul>	
<u> </u>	
NOTE: This Board requires membership with one of the following none, please remove board from your application. Are you knowl have experience in, or extensive background in any of the follow Select all that apply. *	edgeable, ing areas?
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Question applies to multiple boards  NOTE: This Board requires membership with one of the following none, please remove board from your application. Are you knowl have experience in, or extensive background in any of the follow Select all that apply. *  Active in community activities significant enough to confirm knowledge of individuals within the community  Question applies to Water Advisory Group  Do you reside within one of the Stockton Municipal Utilities' thre service areas?	edgeable, ing areas? issues and
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Please tell us about yourself and why you want to serve.
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Lived in stockton for 15 yrs, retired, part time self employed, work in mental health advocate for South Stockton and marginal populations

Please state the reason you would like to be a member of this board/commission.

Doing my civic duty and represent district 6 Councilmember, underserved communities, really involved with the world's sustainable development goals

Have you served on an advisory group before?

⊙ Yes ○ No

If yes, please explain.

Mayor's Task Force for People with Disabilities Taft Community Advisory Board Tri City Homeless Coalition, Alameda county SJC Behavioral Health Services Behavioral Health Board Election Advisory Committee

How did you hear about the position?

**Email** 

City Council Policy 3.03 states that Commissioners are required to attend meetings on a regular basis. If appointed, will you be able to attend meetings regularly and devote the time necessary to fulfill your duties as a member?

Yes ○ No

Do you or immediate family members have any relationship (professional, financial, other) that may present a potential conflict of interest for this advisory group?

If yes, please explain

n/a

## **Background Information**

Upload a Resume

Based on your best judgment, does this Commission make decisions that may affect any sources of income, interests in real property, or investments of you or your spouse?

## **Voter Registration (Questions appear if required)**

Submit Application					
Please identify any specialized accommodations needed for equal participation:					
n/a Service dogs					
Enter Your Initials:					
PB					
Date Signed					
11082023					