

**KING COUNTY BOARDS AND COMMISSIONS
APPLICATION FORM**



King County

(A resume may be substituted in lieu of submitting a completed application form)

PLEASE NOTE: *Information provided on this form will be a public record subject to free and open examination by any person under the Washington State Public Records Act (RCW 42.56.250). However, while we will disclose the applicant's name, the applicant's address, phone number and email address will be redacted.*

Thank you for your interest in serving on a King County board or commission. Individuals selected to serve on a King County board or commission will also be required to complete a King County Ethics Program Financial Disclosure Form within two weeks of being nominated to serve on a King County board or commission. Individuals appointed to serve on a board or commission that is overseen by an agency independent of King County government are exempt from the financial disclosure filing requirement.

I'm Interested in Serving on the (Board or Commission Name):

IPAC

My Name Is:

Carol Basile

Preferred Contact Information:

Address	530 Homeland Dr.
City, State, Zip Code	Edmonds, WA 98020
Home Phone	206 263 9255
Work Phone	206 979 8102
Cell Phone	206 979 8102
Email Address	Carol.basile@kingcounty.gov

Physical Home Address (REQUIRED if different from preferred mailing address)

Home Address	
City, State, Zip Code	

Current Employer

Job Title	Treasury Manager
Date of Employment	June 1, 2019
Company Name	King County
Street Address	Admin Bldg
City, State, Zip Code	Seattle, WA 98104

King County Council District (Please type an "X" in the box to the right of your district)

1 2 3 4 5 6 7 8 9 Don't Know n/a

Have you served on any other Board, Commission, or Committees (Please list them below)?

Board, Commission or Committee Names	Year Appointed	Term Expired

Please explain why you feel you are the most qualified candidate for this appointment.

The Treasury Manager role is included in the committee.

How did you learn of this opportunity?

Upon hire.

Do you hold any professional licenses, registrations or certificates in any field (Please type an "X" in the box)?

Yes No

If you hold any professional licenses, please list them here:

Inactive CPA

PERSONAL INFORMATION (OPTIONAL)

The King County Council and the King County Executive are committed to inclusiveness and outreach to all King County residents to ensure that King County boards and commissions are reflective of the community we serve. Providing information in the section below is voluntary but will assist in achieving this goal.

How do you identify?

Race/Ethnicity:	
Gender:	
Sexual Orientation:	
Preferred Pronoun: <i>(he/him; she/her; they/them, etc.)</i>	

Do you have a disability as defined by the Americans with Disabilities Act? (Please type an "X" in the boxes that apply to you)

Yes No

Generation Range (Please type an "X" to the right of the age range that applies to you):

30 or younger 31-41 42-52 53-63 64-74 75 or older

Person to Notify in Case of Emergency (OPTIONAL)

Name	
Home Phone	
Work Phone	
Cell Phone	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete to the best of my knowledge.

Name (<i>typed or signature</i>)	Carol Basile
Date	7/12/2019

Please return completed form to:

(You can either mail your completed form to us; scan your completed form then email it to us as a PDF attachment; or after filling out the form and typing your name on the signature line, save the completed form to your hard drive and then attach the completed form to an email.)

Rick Ybarra, Liaison for Boards and Commissions
King County Executive Office
401 Fifth Ave, Suite 800
Seattle, WA 98104
Direct Line: 206-263-9651
Email: Rick.Ybarra@kingcounty.gov

**This material is available in alternate formats for persons with disabilities.
Please contact 206-263-9651, TTY Relay: 711, or
e-mail Rick.Ybarra@kingcounty.gov**