

KING COUNTY BOARDS & COMMISSIONS (A résumé may be submitted 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 interested in serving on a King County board or commission will be required to also 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.

APPLICATION FORM

(A résumé may be submitted in lieu of submitting a completed application form)

Applying for appointment to serve on:

Please Select One: Office of Law Enforcement Oversight Citizen's panel

If you are not appointed to the board listed above are you interested in serving on a different King County board or commission? If so, which one?

	or Behavioral Health board.					
	Name: Melodie Reece					
	Preferred Phone Contact Number: Preferred Phone Type (Please circle one):					
	360-290-8152 Home Work Cell					
	Personal Email Address: melodie parcia Ognail. com					
	Preferred Mailing Address: 12659 14th pl 5					
	Street:					
1	City: Burien WA Zip 98/68					
	Physical Home Address (if different):					
	Street:					
	City: WA Zip					
	Current Employer:					
	Job Title: Public Defender Association					

Date of Employment

08/2019

	Company Nar	me:					4
4	Street:				3		
	City:			WA	Zip		
							*
	-	Council Distric			9 🗌 Don't	Know	
	Education (High School, College/University:						
	School Name	Evans Sc	hool of Pi	ublic Polici	y(UW)	Year Graduated/Deg	2019 MPA
		University				Year Graduated/Deg	2013
	Professional li	icenses held (If	applicable (to specific boar	d/commission)):	
	ж. ¹⁴ ж.	* +	*	a.	±		
	Memberships	on any city an	d/or county	boards, comm	ssions or com	mittees and dates of	terms:
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	additional par	per if needed):			×	his appointment (att	
	1 live	in Burien	and have	e been inc	iolved in	the developm	ent of
L.E	A.D in	Burien d	+ white	Center.	lwork clo	sely with la	w enforcement
and	have expe	evience adv	locating	for vulner	able popu	ulations with	a law enforcent.
l wa	ark with a	lens of s	acial equ	ity, harm	reduction	ulations with on, and resto	justice.
	How did you	learn of this op	portunity?			r,	
	Attendiv	y CACL	EO me	seting in	Novemb	er/Decem	ber

1.5

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 <u>voluntary</u> but will assist in achieving this goal.*

Race/Ethnicity: American Indian/Alaska Native	Native Hawaiian or other Pacific Islander
Asian	White/Caucasian
African American/Black	Two or more races
Hispanic/Latino	— 、
Gender: Male Female Transgender	Orientation LGBTQ
Do you have a disability as defined by the A Yes No	Americans with Disabilities Act?
Generation: 30 or younger 31-41 42-52	53-63 64-74 75 or older

*To the best of my knowledge the information provided on this application form is true and correct.

Date

Please return completed form to:

Rick Ybarra, Liaison for Boards and Commissions King County Office of Civil Rights & Open Government 401 Fifth Avenue, Suite 215 Mailstop: CNK-ES-0215 Seattle, WA 98104 Direct Line: 206-263-9651

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

Please print your completed form and either send it to the address above or scan your completed application and then send it to us via email as a PDF attachment.



Office of Law Enforcement Oversight www.kingcounty.gov/oleo

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Thank you for your interest in Community Advisory Committee for Law Enforcement Oversight (CACLEO). Individuals interested in serving on a King County board, commission or committee will be required to also complete a King County Ethics Program Financial Disclosure Form within two weeks of being nominated.

CACLEO APPLICATION FORM

CONTACT INFORMATION

Name: Melodie Reece Garcia

Phone number: 360-280-8152

E-mail address: melodie.reece@defender.org

Street Address: 12659 14th PL S Burien WA 98168

King County Council District #: 4

PERSONAL INFORMATION

King County OLEO is committed to inclusiveness and outreach to all King County residents to ensure the CAC is reflective of the public we serve. *Providing information below is voluntary, and will assist in achieving this goal.*

Race/Ethnicity/Language/Immigration:

(Check all that apply)

Asian/Pacific Islander	White
📕 African American	🔲 Immigrant
🗌 African American (New Arrival)	🔲 Refugee
Native American	🗌 Non-Citizen
Latinx	

Gender Identity & Orientation: (Check all that apply)

(Yes/No)

Female
 Male
 Non-Cis
 Transgendered
 LGBQ

Do you have a disability as defined by the Americans with Disabilities Act?

Age:			
	35/Under	36-59	60+

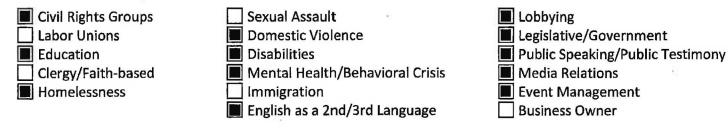
(Continue on next page)

EXPERIENCE, COMMUNITY ENGAGEMENT & SERVICE HISTORY

On a separate page, please answer the following:

- 1. Why are you interested in police accountability and the work of the OLEO CAC?
- 2. Please list and briefly describe the community-based organizations with which you are affiliated.
- 3. Do you have experience conducting outreach to the public? If so, please describe.
- 4. Please describe your experience in event or meeting planning and management.
- 5. What is your experience working or interacting with police?

Please indicate the following areas in which you have professional or personal experience:



AVAILABILITY (YES/NO)

Are you able to attend a monthly meeting and commit 4 to 6 hours per month to CACLEO? $_{\rm Y}$

Are you able to attend community events, trainings, or join phone calls with OLEO staff (always scheduled in advance) if within monthly commitment? γ

Are you able to participate effectively in committee meetings, collaborate respectfully with other members, listen and provide constructive feedback, and be open to a diversity of ideas? γ

Are you able to check e-mail and make timely responses? $_{
m Y}$

AUTHORIZATION

By signing below, you indicate that the information provided on this application form is true and correct, to the best of your knowledge.

alin Signature

05/19/2020

Date (MM/DD/YYYY)

Please return the completed form to:

ATTN: OLEO Community Engagement Manager King County Office of Law Enforcement Oversight (OLEO)

Via e-mail: USPS:

l: oleo@kingcounty.gov 6: 810 3rd Avenue, Seattle WA 98104