

Board of Supervisors Supplemental Application for Appointment to the Reentry Council
(Form effective Augues 2014)

Seats 1, 2, 3, and 4: Former inmates of the San Francisco County Jail, a California Department of Corrections and Rehabilitation facility, and/or a United States Bureau of Prisons facility

Enter your name, mailing address and daytime telephone number in the spaces provided. Because this form is a document available for public review, **you may provide a business or office address**, telephone number and e-mail address instead of your home address or other personal contact information.

Print Name: _____

Home Address: _____ **Zip:** _____

Home Phone: _____ **Occupation:** _____

Work Phone: _____ **Employer:** _____

Business Address: _____ **Zip:** _____

E-mail Address: _____ **FAX #:** _____

*It is a **requirement** that all appointees to Seats 1, 2, 3, and 4 of the Reentry Council have been an inmate in the San Francisco County Jail, a California Department of Corrections and Rehabilitation facility, and/or a United State Bureau of Prison facility. Please answer all of the following questions.*

1. Have you ever been an inmate of (check all that apply):

San Francisco County Jail? yes

California Department of Corrections and Rehabilitation* facility? yes

United States Bureau of Prisons facility? yes

**California Department of Corrections and Rehabilitation (CDCR) operates the facilities previously operated by the California Department of Corrections (CDC) and the Department of Juvenile Justice (DJJ).*

2. The person appointed to *Seat 1* must identify as being a survivor of violence or crime. Do you identify as a survivor of violence or crime? yes no

3. The person appointed to *Seat 2* must have expertise in providing services to individuals exiting the criminal justice system. Do you have experience or expertise in providing services to individuals exiting the criminal justice system? yes no If yes, please describe:

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4. The person appointed to *Seat 3* must have been released from custody within two years of his or her appointment. If you were released from custody within the last two years, on what date were you released? _____

5. The person appointed to *Seat 4* must have served multiple terms of incarceration. Multiple terms could include more than one term served in the same facility, or more than one term served in different facilities. Have you served multiple terms of incarceration? yes no

6. What was your experience transitioning back to San Francisco after having been incarcerated? What helped you? What were the barriers?

7. How can we help other people transition from prisons and jails more successfully? How can we help people permanently exit the criminal justice system?

8. What do you hope that the Reentry Council will achieve?

If necessary, please attach supplemental sheet(s) and/or attachments.

Submit this form, along with the Board of Supervisors Application for Boards, Commissions, and Committees, to Clerk's Office, Board of Supervisors, 1 Dr. Carlton B. Goodlett Place, Room 244, San Francisco, CA 94102-4689