



**WORKFORCE DEVELOPMENT BOARD  
(WDB)**

*for the Counties of Colusa, Glenn, Sutter and Yuba*

1110 Civic Center Blvd., Ste. 402A • Yuba City, CA 95993 • (530) 822-7145 • FAX (530) 822-7150 • [www.northcentralcounties.org](http://www.northcentralcounties.org)

**Application for Membership**

Name:		Title:
Business:		
Business Address:		Bus. Phone:
Email Address:		Alt. Phone:
Residence Address:		
Time available for meetings (days, evenings, etc.):		
Qualifications/Areas of expertise:		
What experience do you have serving on workforce development boards (i.e., WIBs, PICs, Employer Advisory Groups, school-to-career, etc.)?		
What do you feel you could contribute?		
Additional Comments (attach resume if you wish):		

NCCC Workforce Development Board  
 Membership Application

Areas of Representation (check all that apply and identify the business or organization):

<input type="checkbox"/> Business	<input type="checkbox"/> Adult Education & Literacy
<input type="checkbox"/> State Employment Service	<input type="checkbox"/> Institution of Higher Education, inc. Community Colleges
<input type="checkbox"/> Labor Organization	<input type="checkbox"/> Vocational Rehabilitation Organization
<input type="checkbox"/> Registered Apprenticeship Program	<input type="checkbox"/> Economic & Community Development
<input type="checkbox"/> Community Based Organization	<input type="checkbox"/> Public Assistance Programs
<input type="checkbox"/> Veterans Programs Organization	<input type="checkbox"/> Public Housing Organization
<input type="checkbox"/> Youth Programs Organization	<input type="checkbox"/> Public Transportation Organization
<input type="checkbox"/> Migrant & Seasonal Farmworker Programs	<input type="checkbox"/> Philanthropic Organization
<input type="checkbox"/> Employment & Training Programs for Individuals with Disabilities	

\_\_\_\_\_  
 Applicant Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Nominating Organization Signature  
*(If Applicable)*

\_\_\_\_\_  
 Date