

Application Form

Profile

Adolfo

First Name

Correa

Last Name

Middle Initial

[Redacted]

Home Address

[Redacted]

City

[Redacted]

Email Address

[Redacted]

Suite or Apt

[Redacted]

State

[Redacted]

Postal Code

Employer

[Redacted]

Primary Phone

Job Title

[Redacted]

Alternate Phone

How long have you lived in Washoe County?

2 years

What district do you live in? *

District 2

Question applies to multiple boards

To see which CAB area you reside in, please go to the link provided: <https://gis.washoecounty.us/wrms/quick/cab>

Question applies to multiple boards

Are you registered to vote in Washoe County?

Yes No

Interests & Experiences

Which Boards would you like to apply for?

Washoe County Senior Services Advisory Board: Submitted

Please tell us about yourself and why you want to serve.

Why are you interested in serving on this board/commission?

I have retired and moved to Reno in 2021. I would like to learn more about the city of Reno, particularly the county where I live, and see if there are any ways in which I can serve my new community.

How do you feel you are qualified to serve on this board? Include any past board/commission experience.

I have no past board/commission experience, but I am willing to learn and contribute to the welfare of the community. I am retired medical researcher with training and experience in epidemiology and public health in academia and the federal government.

[Adolfo Correa Resume_0219_21.pdf](#)

Upload a Resume

Please attach a letter of recommendation.

Nepotism

Do you currently serve on any boards/committees?

Yes No

If yes, please list the boards/committees

Are you related to anyone employed by Washoe County by blood or marriage?

Yes No

If yes, please list the names and relationship of all persons you are related to.

Question applies to multiple boards

Please Agree with the Following Statement

I understand the role and responsibilities of membership on this board or commission and am willing to serve. If appointed, I will attend required meetings and training and will adhere to pertinent bylaws. I understand that some appointments require a Financial Disclosure Form to be submitted to the Nevada State Ethics Commission. I certify that, to the best of my knowledge, the information I have provided in this application is true and correct. If the information provided is false or incomplete, it shall be sufficient cause for disqualification or removal. If appointed to a Citizen Advisory Board (CAB), I agree to attend a CAB new member orientation session and open meeting law training within six months of my appointment. I understand that failure to comply with this requirement will result in automatic removal from the Citizen Advisory Board.

I Agree

Please note that after submitting your application, it becomes part of the public record and is available for public viewing.

Adolfo Correa