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**Profile**

Jessica

First Name

Fernandez

Middle Initial

Last Name

Merced County

Employer

Fair Hearing Officer

Job Title

Email AddressPrimary PhoneAlternate Phone

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**Are you 18 years of age or older? (Required)**☒ Yes ☐ No

Question applies to multiple boards

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**Do you live within the City Limits of Merced? (Required)**☒ Yes ☐ NoStreet AddressCitySuite or AptStatePostal Code

Question applies to multiple boards

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**Are you a registered voter in the City of Merced? (Required)**☒ Yes ☐ No

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**Which Council district do you live in? \***☒ District 4

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**Are you currently serving on a Board or Commission? If so, please list:**No

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**Which Boards would you like to apply for?**Personnel Board: Submitted

Question applies to multiple boards

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**Highest Level of Education Completed: \***☒ Associate's Degree

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## Communication

**The City of Merced uses email as a preferred method of communication regarding your application. Is this acceptable to you?**

☒ Yes ☐ No

**If you selected no, please identify how you would like to be contacted:**

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## Interests & Experiences

**Tell us about yourself, and why you are applying for this particular Board or Commission:**

My names is Jessica Fernandez, I have worked for Merced County for about four years and prior to that I have worked a wide variety of different positions with different companies. I have learned so many different traits making me a very versatile person, I am knowledgeable in marketing, I have organized events, I have assisted in taking minutes for board meetings, I have facilitated board meetings. I am a well rounded person my many interest are the out doors, cooking, and helping families. Board roles provide you with an incredible opportunity to meet influential, intelligent and well-connected people. You may meet an organization's strategic partners, its clients and investors, as well as colleagues and leaders across industries and government.

**Please list your current employer and relevant volunteer experience.**

Current Employer: Merced County Human Services Agency, I have Volunteered at: Dignity Health before COVID Emmanuel Hospital Army Salvation Merced County Outreach Hughson Chamber of Commerce Homeless count

**What is your understanding of the roles and responsibilities of this Board or Commission?**

To my understanding the primary responsibility of Board of Commission is to advise and make recommendations to the Town Council. It is the Council's role to absorb the advice and recommendations offered by numerous sources and to make decisions to the best of its ability.

**Do you have experience or special knowledge pertaining to this Board or Commission?**

I have a knowledge in review regulations and civil rights as my current position I am an appeals representative and have a wide variety of knowledge citing, reviewing and implementing regulations to county processes.

**Any other comments you would like to add that may assist the City Council in their decision?**

I would like to add serving on a nonprofit board is a fantastic learning opportunity for myself. It's a chance to learn more about the city council and expand my knowledge. It's also a valuable opportunity for learning more about governance and leadership. I would be a great assist to this board I am willing to put in the time and dedication it takes to make a difference.

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Upload a Resume

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**Requirements**

Question applies to multiple boards

**AB 1234 Ethics Training**

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☒ I Agree \*

Question applies to multiple boards

**Attendance Policy**

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☒ I Agree \*

Question applies to multiple boards

**Statement of Economic Interests - FPPC Form 700**

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☒ I Agree \*

Question applies to multiple boards

**Oath of Office**

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☒ I Agree \*

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Question applies to multiple boards

**Public Scrutiny**

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☒ I Agree \*

Question applies to multiple boards

**How did you hear about this vacancy? \***

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☒ Other

**If you selected other, please indicate how you learned about the vacancy:**

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Deputy Directory of HSA Mary Ellen Araña

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**Demographics**

**Ethnicity**

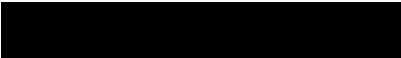
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☒ Hispanic

**Gender**

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☒ Female



Date of Birth

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**Submission**

I declare under penalty of disqualification or termination that all statements in this application are true and complete to the best of my knowledge.

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JF