

APPLICATION FOR MEMBERSHIP

GROUNDWATER ADVISORY COMMITTEE FOR THE TULELAKE SUBBASIN GROUNDWATER SUSTAINABILITY AGENCY  
Applications will be accepted from stakeholders of the Tulelake Groundwater Subbasin boundary. A boundary map is available upon request.

Please complete this application in a brief, yet informative manner. If questions are not applicable, enter “NA.”

**Name:**

*First Middle Last*

**Address:**

*Street City State Zip*

**Phone:**

*Home Work Cell*

**Email:**

**Employer:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Occupation:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Have you previously served on an Advisory Committee? YES NO**

The Groundwater Sustainability Plan (GSP) Advisory Committee Members will analyze groundwater sustainability information and provide recommendations to the Tulelake Subbasin Core Team on key policy issues that will form the Plan. Members will represent diverse interests within the subbasin. For more information on the Advisory Committee contact Brad Kirby at the Tulelake Irrigation District at (530) 667-2249.

**When are you available to attend committee meetings?**

**Weekday Mornings Weekday Afternoons Weekday Evenings**

Personal information on this form will become a matter of public record subject to disclosure under the California Public Records Act (California Government Code section 6250 et. Seq.).

**Please mark all that apply**

**☐**Water user/Board Member of

**☐**Work in agriculture or represent agricultural interests

**☐**Member of property rights organization, environmental organization or community based organization. Please specify organization:

**☐**Tribal Representative. Please specify Tribe:

**Education:**

**Professional License, Registration or Certification, if applicable:**

**Relevant Experience (paid employment or volunteer):**

**Please list any current or former membership or board position(s) you have held with other organizations:**

**Examples of past experiences showing ability to work collaboratively with others of differing viewpoints and achieve good faith compromise:**

**Why do you wish to serve in this capacity?**

**Personal and professional achievements (please include activities which address contributions you could make to the committee/council/board/panel):**

**How you would like to receive future communications:**  Email  Phone

**\*Please submit two signed and dated letters of recommendation.**

**How did you hear about the GSP Advisory Committee opening? TID Board Meeting City of Tulelake County of Siskiyou County of Modoc Community Announcement**

**Letter from Core Team Other**

I ATTEST THAT ALL INFORMATION CONTAINED IN THIS DOCUMENT IS TRUE AND CORRECT.

Signature of Applicant Date

**PLEASE RETURN THIS FORM TO:**

Tulelake Subbasin Core Team

Att: Clerk

2717 Havlina Road

Tulelake, CA 96134

Applications can also be submitted via e-mail at: tiffanymartinez@co.modoc.ca.us