

344 Salinas Street, Suite 101 | Salinas, CA 93901

Monterey County Workforce Development Board (WDB) Membership Application

Name:	Alma Diaz		Date Submitted:	02/28/2025	
Title:	Salinas/Capitola Cluster Fie	ld Office Manager			
Busines	s/Organization Name:	Employment Development Department -WS	SB, LA Coastal Division, Al	RU 045	
Repre	esentation				
Bi		e of the following categories that yo	Local Educati Community-E Wagner-Peyson	onal Entity Based Organization	
Conto	act Information				
Busines	s/Organization Name:	Employment Development Department -W	SB, LA Coastal Division, A	RU 045	
City: S	alinas	State: California	Zi	p code: 93901	
Phone:			Fax:		
Mobile:					
Email a	udress.				
	address:				
Busines	s license number:				
City of i	residence:				
Busin	ess Related Que	estions			
Please a	nswer the following que	stions and attach any additional pag	ges, if necessary:		
1. Nu	mber of current employ	vees: 20			
4 Ple	Please describe the nature of your business and your position: Capitola and Salinas EDD WSB LACD Field Office Manager				

5.	Please list your current chamber and association memberships, the duration of each membership and the positions you currently hold:				
	1. Santa Cruz WDB (membership approved, pending Oath) 2. California Workforce Connection (CWC) - LA Chapter, current position-Secretary (5 years)				
6.	Please list any professional award(s) or recognition you have received within the last 5 years: Group award: CWC Region 2 Management Team Award 2023				
7.	As a member of your business with optimum policy authority, please describe your responsibilities within your organization: Manage Wagner-Peyser programs, personnel and premises within the EDD Capitola/Salinas Cluster Workforce Services offices.				
	within the LDD Capitola Salmas Cluster Workforce Services Unices.				
Monterey County WDB Related Questions					
Ple	ase answer the following questions and attach any additional pages, if necessary:				
1.	What do you hope to contribute from your participation on the Monterey County WDB See attached document				
2.	What experience in the areas of fundraising, budget analysis, workforce policy development, youth services, knowledge of the labor market, and community involvement or linkages with educational agencies do you bring to the Monterey County WDB, as applicable?				
	See attached document				
3.	Membership on the Monterey County WDB requires that each member attend a full WDB meeting every two months, attend training sessions for board members and become an advocate for workforce development. The time commitment for these activities ranges from a minimum of 4 to 10 hours per month. Can you make that time commitment? Yes \(\subseteq \) No \(\subseteq \)				
4.	Membership on the Monterey County WDB requires that each member serves on a sub-committee. The time commitment for this activity ranges from a minimum of 3 to 4 hours per month. Can you make that time commitment? Yes ✓ No ☐				
5.	Why do you wish to serve on the Monterey County WDB? (Describe in 100 words or less) See attached document				
Si	gnature and Acknowledgement				
	e undersigned, certify that the information on this application is true and correct to the best of my knowledge and that, pointed to serve, I will do so to the best of my ability and in the best interest of Monterey County and its citizens.				
Sig	nature: Date: Date:				