Community Restorative Justice Commission of MONTEREY COUNTY

Commission Member Application

NAME: Zonalo	1	Ulende	<u>^</u> ,	_	DATE: April	18,2024	
				/	A of Edo	regtional Service ative Credential	
Special licenses, credentia	ıls, trair	ning certificates:	180	ching &	MUMINION		
Previous volunteer exper	ience:	Address		Phone	Job/Position	Supervisor	
Business/Organization Name		. Address	100	2 X.	Title		
CRIC MAY CHY		- F 11.			Commission 1	Greg Stewart	
Church of JC of CD	255	E.HIVIN	Diluan		Various	Cried Dienos	
How did you hear about Curent Comi	icted of	a crime resultin	evious	Juje	1011 Conception		
If yes, indicate the follow	ing:	Charge:	Date Charged: on: Action Taken:				
Why are you interested in have been 10 years and Those who serve on the participate in a conference of the participate in	f wou	de live n	d to attend	ommunity R	estorative Justice Someting Lield o	n the 3 rd Monday from	
Y	www.ction	on this appli	cation is	true and	correct to the b	est of my knowledge.	
Furthermore, my signal records check, as well as	Tre pro	vides my autho	rization to	the County	A OI MIOUTELEA TO	ao ariver and criminai	
Signature Signature	nde			D	April C	8,2024	
						II ID ad Callman	

Please contact (831) 755-3961 for questions. Please return this application to 1422 Natividad Road, Salinas, CA 93906 or fax it to (831) 759-7242.