

# Seattle-King County Advisory Council on Aging & Disability Services

*Advocating for local, state, and national programs that promote quality of life for older people and adults with disabilities*

**Mailing address:** PO Box 34215, Seattle, WA 98124-4215

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**Relay:** 711

## Application

Name:

Home address:  Zip:

Work address:  Zip:

Day phone:  Fax:

E-mail:

It is a goal to have ADS Advisory Council composition reflect the profile of the population served by Aging and Disability Services. Please provide ethnicity and age information below.

**Race/ethnic background:**

- African American/Black  
 Asian/Pacific Islander  
 White/Caucasian

- Hispanic/Latinx  
 Native American  
 Other—specify:

**Age:**       18–25       45–54       65–74       85+  
 25–44       55–64       75–84

**Membership in other organizations, boards, and councils:**

1		4	
2		5	
3		6	

*In association with the Area Agency on Aging for Seattle-King County*



**Qualifications**

Please submit a resume and cover letter that summarize your qualifications and the reasons why you wish to be appointed to the ADS Advisory Council. Include any information about your experience working with older people and/or people with disabilities.

**Accommodations:**

Do you require any accommodation in order to participate in Advisory Council meetings?

If so, please describe in the comment box below:

**References:**

Please provide names and contact information for three (3) people who are familiar with your interests and experience.

	Name	Relationship	Day Phone
1			
2			
3			

Signature  Date

*If submitting electronically, type your name in the signature line above.*

**To submit by mail:**

1. If you completed the form on your computer, save it to your hard drive. The form does not save automatically.
2. Print your application, resume, and cover letter.
3. Mail your application package to:

ADS Advisory Council  
 Aging and Disability Services  
 PO Box 34215  
 Seattle, WA 98124-4215

**To submit by e-mail:**

1. If you completed the form on your computer, save it to your hard drive. The form does not save automatically.
2. Scan documents if necessary.
3. Attach your application, resume, and cover letter to an e-mail message addressed to:

[aginginfo@seattle.gov](mailto:aginginfo@seattle.gov)