PEA Committee

From:

Yukilei Sugimura

Sent:

Thursday, March 23, 2017 9:01 AM

To:

PEA Committee Aimee Anderson

Subject: Attachments:

Anderson.pdf



BOARD/COMMISSION APPLICATION FORM

(Please print or type)

| Name: | Anderson | | Aimee | Anne | |
|-------------------|------------------------------------|----------------------------------------------------|----------------------------|-----------------------------------------------------------------------------------|--|
| _ | (Last) | | (First) | • | |
| City of F | Residence: <u>Wal</u> i | uku | | Island: Maui | |
| Current | Employer & Po | sition: State of Haw | vali - State Special Poli | ce Officer | |
| Busines Phone: | 984-8212 | Business Email (optional): aimlessracing@yahoo.com | | | |
| | | | | | |
| County / | Animal Board, I b | elieve I can bring kno | wiedge and experience to | the MCACB. I am also well versed in the contents | |
| and app | plication of the | current Maui Count | y dangerous dog ordina | nces. During my tenure with MHS, I attended numerous | |
| MCACE | 3 meetings and | hearings as the rep | presentative of MHS as | Island: Maui te Special Police Officer Email | |
| cases. | | | | | |
| Employ | ment History: om | То | | | |
| 3-2010 | <u> </u> | Current | State of Hawaii - | State Special Police | |
| 3-1988 | | 9-2008 | Maui Humane Socie | Maui Humane Society - ACO, Chief Cruelty Investigator, Director of Animal Control | |
| 1982 | | 1987 State Farm - Arson and Fraud Investigator | | | |
| | | | | | |
| | • | sional Organization ounty Domestic Vio | | | |
| Past Me | ember - Maui C | oalition Against Do | mestic Violence | | |
| Past Me | ember - Maui C | rime Stoppers | | | |
| Previou: None | s County Exper | ience (employment | or board member): | • | |
| | onal Backgroun I College - A.S. | d: Animal Health Tecl | hnician - | | |
| Univers | ity of Missouri L | .ETI - Nationally Ce | ertified Animal Cruelty In | vestigator | |
| Univers | ity of Missouri l | ETI - Nationally Ce | ertified Equine Abuse In | vestigator | |
| Consen | it to be Nomina | ated and Certificat | ion of Truthfulness an | d Accuracy of Information: | |
| I declare | e that the above | statements are tru | e and accurate to the b | est of my knowledge. | |
| Signatu | re: <i>2</i> | mer lines | | Date: 3-22-17 | |
| Most ho | ant/commission | sonointmente ora | subject to confirmation | by the Maui County Council Most of these positions or | |

most poarty-commission appointments are subject to confirmation by the Maui County Council. Most of these positions are for five-year terms. If you are selected as a nominee, the information contained on this form will be provided to the public upon request.

Please send completed forms to MAUI COUNTY COUNCIL. 200 SOUTH HIGH STREET. WAILUKU. HAWAII 96795: 6772. 770.7686. For further information, call 270.7838: 1.200.272.0008 (from 1 analy): 1.200.272.0026 (from 1 analy):