SALT LAKE COUNTY

Board Member Nomination/Application Behavioral Health Advisory Council Date: 12/6/19 Nominated By (if applicable): Dan Braun, LCSW Nominee's Name Home Address: Work Address: Home Phone: k Phone: Would applicant prefer work or home phone/address used as mailing address? Work Salt Lake County Council District #: (To find the district you live in go to http://vote.utah.gov/elected-officials/, enter your address and zip code, then click on Find. The results will produce a map with a red diamond at your home location. Click on the diamond and wait for a text box to appear containing your elected officials. Scroll down until you see the fourth County Council representative (not "At-Large") and list that name above.) I prefer that my personal contact information remain private and protected Unique qualifications and/or perspectives you would bring to a Board or Commission: am highly invested in positively impacting County services. I believe individuals ran improve quality of life decrease stioma, increase satisfaction with services, all while increasing efficiency 7 effect iveness. I currently work in at a medical behavioral health interrolled setting and crew provide vital feed back as the expansion pilot moves forward.

Tako have pediatric, peer support, day outpalient housing residential experience **Board Coordinator Staff Section** Salt Lake County does not discriminate on the basis of race, color, national origin, sex, sexual orientation, age, religion, marital status, or disability. Is this a (check one): reappointment __ fill vacant seat __new seat added to board If filling a vacant seat, why? __ Term expired (expiration date: _____) ____ Member Resigned Other ____ Name of board member being replaced: This is a 3 year term. Term will begin 1-1 of 20 and end 12-31 of 2022 Comments: Dan served his first 3-year term and is now an

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