

**LANCASTER COUNTY DRUG AND ALCOHOL COMMISSION  
ADVISORY BOARD  
MEMBERSHIP PROFILE**

**PLEASE TYPE OR PRINT**

**PERSONAL INFORMATION**

Name:

Home Address:

Home E-Mail Address:

Home Phone or Cell Phone:

Business Title:

Business Address:

Business Phone:

Business E-Mail Address:

**EDUCATION**

Schools Attended:

Major Area of Specialization:

Degrees/Diplomas:

**PROFESSIONAL AFFILIATIONS**

The State requires some of the categories that need to be represented on the SCA Advisory Board. Please check any of the categories below that fit your professional affiliation:

Criminal Justice

Business

Labor

Education

Medicine

Psycho-Social

Other \_\_\_\_\_

**DDAP REQUIREMENT:**

STATEMENT AS TO WHY YOU ARE INTERESTED IN SERVING ON THE ADVISORY BOARD

COMMUNITY ACTIVITIES/ VOLUNTEER SERVICE

ADDITIONAL COMMENTS

**Reminder:** Members of the SCA Advisory Board **cannot** be SCA employees or relatives of SCA staff, contracted providers, on the Board of Contracted Providers or anyone associated with or related to programs which are contracted with the Drug and Alcohol Commission.

Candidates are selected or appointed by the Lancaster County Commissioners. Each appointment is for a three-year term, and the maximum number of terms a person can be appointed is two. Therefore, a person can serve a total of six years, if a second term is approved. Thank you for applying as a candidate for the SCA Advisory Board.

**If available, please attach your resume to this Membership Profile.**

Return to: Lancaster County Drug and Alcohol Commission  
150 North Queen Street, Suite 410  
Lancaster, PA 17603

Or e-mail to Ashley Beauchamp at [ABeauchamp@lancastercountypa.gov](mailto:ABeauchamp@lancastercountypa.gov)