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## Profile

Shuntaneka

First Name

Brooks

Last Name

Middle Initial

Email Address

Street Address

Suite or Apt

City

State

Postal Code

Primary Phone

Alternate Phone

Kelly Connect (Apple Project)

Employer

Job Title

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## Which Boards would you like to apply for?

Adult Care Home Community Advisory Committee: Submitted

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## County Commissioner District \*

☒ District 4

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## Interests & Experiences

### Why are you interested in serving on a board or commission?

I believe in Patient's Rights and would like to be an advocate.

[Shuntaneka\\_Brooks\\_Resume.pdf](#)

Upload a Resume

Question applies to multiple boards

**Briefly list your professional, educational and volunteer experiences that are most relevant to the mission and duties of this board:**

See attached resume

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## Demographics

Ethnicity

☒ African American

Gender

☒ Female

Date of Birth