

**Profile**

**Public Records Law Statement:** Please be advised that this application and attachments submitted sent to and from Guilford County is subject to the NC Public Records Law and may be disclosed to third parties.

**Confidentiality Statement:** If appointed, please indicate to the Clerk's Office your preferred phone number and/or email you select to be shared to public.

Francina \_\_\_\_\_ D \_\_\_\_\_ Parrish \_\_\_\_\_  
First Name Middle Initial Last Name

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Street Address Suite or Apt

\_\_\_\_\_  
City State Postal Code

\_\_\_\_\_  
Primary Phone Alternate Phone

Trillium Health Resources \_\_\_\_\_  
Employer Job Title Regional DJJ Engagement Clinician

**Which Boards would you like to apply for?**

Juvenile Crime Prevention Council: Submitted

**County Commissioner District \***

District 6

**Interests & Experiences**

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

Licensed Substance use clinician with over 30yrs of experience working with MH SUD and developmentally disable youth and adults. Significant history working with LME/MCO and the Medicaid System.

[F. Parrish\\_updated\\_resume.docx](#)  
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:**

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LCAS Masters of Human Services

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## Demographics

### Ethnicity

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African American

### Gender

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Female



Date of Birth