



## **California Department of Veterans Affairs (CalVet)**

### **Disabled Veteran Business Enterprise (DVBE) Advisory Council**

#### Application for Membership

##### Membership Overview

The purpose of the CalVet DVBE Advisory Council (Council) is to provide a forum for certified DVBE's, DVBE organizations, veteran affiliate organizations and businesses to comment and provide feedback on CalVet and Department of General Services (DGS) policies and practices that affect or impact DVBE utilization. The Council's role is to ensure DVBE participation in State agency contracts, to disseminate information regarding specific CalVet and DGS projects and programs, and to provide a venue for interactive discussions with interested parties.

The Council shall have twenty-five (25) primary members. Eighteen members shall be California Certified DVBE's and seven members shall be from the DVBE, veteran, and business community at large.

An applicant must be either a California certified DVBE, a DVBE organization, a veteran affiliate organization, or a business, and must support the DVBE community. Members serve a two-year term with the option to apply for additional successive terms.

Council members serve at the pleasure of the Secretary California Department of Veterans Affairs or their designee.

The DVBE Advisory Council is not a policy making body. The role of the Council is advisory only and members must strive to represent their affiliations and seek to recommend action to benefit the DVBE program as a whole. They must not act to personally benefit their affiliation to the detriment of the program.

Members shall not represent themselves as speaking or acting on behalf of the DVBE Advisory Council or the California Department of Veterans Affairs or the Department of General Services.

Members are the voice of their affiliation and will bring their concerns to the council and in turn carry the message back to their affiliation.

### Member Information

Date: \_\_\_\_\_

Name \_\_\_\_\_

Street Address  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of Affiliation:  
\_\_\_\_\_

Type of Affiliation \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Mobile \_\_\_\_\_

E-mail \_\_\_\_\_ Website \_\_\_\_\_

DVBE Certification Number (if applicable) \_\_\_\_\_ Expiration Date \_\_\_\_\_

Contractor's License \_\_\_\_\_ Type \_\_\_\_\_ Number \_\_\_\_\_

Contractor's License \_\_\_\_\_ Type \_\_\_\_\_ Number \_\_\_\_\_

### Affiliation Summary

Please include the name, purpose, affiliation size, affiliation's geographical coverage (local, statewide, etc., if applicable), and the length of time the affiliation has been in existence. Also include the number of certified DVBE members (if applicable) of the affiliation you will represent. Please include any other information to assist the Council in determining that membership will support these requirements.



Alternate Member Information (cont.)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Mobile \_\_\_\_\_

E-Mail \_\_\_\_\_ Website \_\_\_\_\_

DVBE Certification Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Contractors License \_\_\_\_\_ Type \_\_\_\_\_ Number \_\_\_\_\_

Contractors License \_\_\_\_\_ Type \_\_\_\_\_ Number \_\_\_\_\_

Person to Notify in Case of Emergency

Name \_\_\_\_\_

Relationship \_\_\_\_\_ email \_\_\_\_\_

Work Telephone \_\_\_\_\_ Mobile \_\_\_\_\_ Other \_\_\_\_\_

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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Mail this application to: Stewart MacKenzie, P.O. Box 942895, Room 105, Sacramento, CA 94295, or Email: (stewart.mackenzie@calvet.ca.gov), or Fax: 916.653.2563

If you have any questions please contact Stewart MacKenzie at:  
stewart.mackenzie@calvet.ca.gov 916 503.8383