Lowndes County Board/Agency Appointee Information Sheet - Submission #69

Date Submitted: 1/26/2020 Date: Board/Agency Applying For: 1/26/2020 Lowndes County Division of Family and Children Services Board Last Name First Name Harraghy Rhonda **Street Address** City/State/Zip **Phone Number Email Address** Occupation Retired Registered Nurse **Professional Experience** Registered Nurse, Court Appointed Special Advocate - Alapaha Judicial Circuit Court Knowledge & Skills Professional background as a Registered Nurse, child development training What knowledge or skills do you possess that would contribute to the Board/Agency to which you are requesting to be appointed? Please list the Board/Agency that you have been or are currently a member of: Called to Care - Lowndes and Echols Counties