

Application Form

Profile

NOTE: PLEASE BE AWARE THAT ALL INFORMATION YOU PROVIDE ON THIS FORM AND ATTACHMENTS ARE OPEN TO PUBLIC REVIEW AND DISCLOSURE PURSUANT TO THE ALASKA PUBLIC RECORDS ACT.

[When completing the application, please put your "MAILING" address in the first address block labeled "HOME." The optional secondary address field is for your "RESIDENCE" address.]

Emily A Kane
First Name Middle Initial Last Name

[Redacted]
Email Address

[Redacted] [Redacted]
Home Address Suite or Apt
[Redacted] [Redacted]
City State Postal Code

[Redacted] [Redacted]
Primary Phone Alternate Phone

Self Naturopathic Physician
Employer Job Title

Residence Address if different from your Mailing "Home" Address listed above

[Redacted]

Residence Address Line 2

Residence City

Juneau

Residence State

AK

Residence Postal Code

99801

Comments

Self Employed Primary Care Doctor a caveat: I have also applied for the Alaska Commission on Aging and if I am accepted I will need to drop the JCOA

Secondary Email Address (if any)

[REDACTED]

Which Boards would you like to apply for?

Juneau Commission on Aging: Submitted

Are you applying for reappointment to this board?

☒ Yes ☐ No

If you are applying for more than one board, how many total boards are you willing to serve on?

☒ 1

Special Needs - please list any special needs below such as need for sign language interpreter, etc...

Interests & Experiences

Please tell us about yourself and why you want to serve. [*Contact the Clerk's Office at 586-5278 or city.clerk@juneau.org if you wish to submit a resume or CV*]

Please explain, with specificity, your reasons for applying to serve on this particular board.

I'm very interested in affordable housing, senior friendly housing and environmentally healthy housing for Juneau. I have committed to age in Juneau and I want to be part of why others choose to stay (or permanently move to) this wonderful town.

Please select the type of board seat for which you are applying *

☒ General Public Seat

Please list any organizations for which you currently serve as a board member, officer, or employee.

Orpheus Project, board secretary Juneau Commission on Aging, chair Natural Healthcare, owner

Employment/Volunteer History: Please list any previous work or volunteer experience you have serving on a board.

Board of Juneau Dance Unlimited 2004-2010; Board of Juneau Birth and Family Center 2010-2013; Board Rainforest Yoga 2015-2017. Board Orpheus Project 2020 ongoing, JCOA x 7 years

Education/Training: Please list both formal and informal education & training experiences:

Undergrad: Harvard University class of 1978. Bastyr University class of 1992. Gobs of medical continuing education from 1992 through the present (30-60 hours yearly)

Licenses/Certifications etc... Please list any professional licenses, certifications, or registrations that may be considered a qualifying criteria for the board to which you are applying.

AK ND 22 AK LAc 18

Demographics

The following information is requested so appointments to boards and commissions reflect the diversity of individuals within the community. If you are applying for a board with age criteria such as the Juneau Commission on Aging or the Youth Activities Board, please include your D.O.B. in the field below.

Ethnicity

☒ Caucasian/Non-Hispanic

Gender

☒ Female


Date of Birth

Acknowledgement/Certification

In order to submit this application, please read and agree to the following statement:

I understand that this is a volunteer position appointed by the City and Borough of Juneau Assembly and requires regular attendance at meetings. I further understand that this application is public information and the merits of my appointment may be discussed at a public forum. In addition, my name may be published in a newspaper or other media. I agree that if I am appointed to serve on a board or commission, I will follow all the laws, procedures, and practices associated with the service of a CBJ boardmember. I certify that the information in this application is true and accurate.

☒ I Agree