

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.]

Jennifer L Carson
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

Bartlett Regional HOspital Behavioral Health Operations
Employer Director
Job Title

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

[Redacted]

Residence Address Line 2

Residence City

Residence State

Residence Postal Code

Comments

Secondary Email Address (if any)

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 have been actively involved with the JCOA for two years and am seeking reappointment. Over the past year, I was involved with getting the Southeast Regional Eldercare Coalition established. We recently were awarded a 2.5 million dollar grant to fund this project. We know that seniors are one of the fastest growing populations in Juneau/Southeast so it is important to assure there is a high level of advocacy in this area. I recently moved from CCS as the director of hospice and home health to BRH as Operations Director of BH where there is little focus on our elders. We are finding that more work needs to be done in this area.

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.

Bartlett Regional Hospital - employee Outgoing Chair of Southeast Regional Eldercare Coalition Juneau Commission on Aging

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

Founding board member for Family Promise Juneau Juneau Commission on Aging Outgoing founder/Chair of Southeast Regional Eldercare Coalition I worked 9.5 years with CCS with the last 5 years as director of hospice and home care of Juneau.

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

I have the following: BA- Psychology and Social Work Masters in Public Administration I have certifications in Healthcare Compliance and Healthcare Privacy Compliance

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.

I have certifications in Healthcare Compliance and Healthcare Privacy Compliance

Demographics

The following *optional* 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