

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.]

Eileen G Hosey

First Name Middle Initial Last Name

Email Address

Home Address

Suite or Apt

City

State

Postal Code

Primary Phone

Alternate Phone

Catholic Community Service

Employer

Case Manager for Southeast Senior Services

Job Title

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

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?

Hospital Board: 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?

None Selected

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

Question applies to multiple boards

How many hours per month are you able to serve?

10 to 15

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](mailto: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.

As a long time Juneau resident i have used the services of the hospital many times for myself and family members. Juneau resident since 1970. Between 1980 and 2006 I was employed by three different physicians' office, working in front end business management, accounts receivable, surgical appointments, correspondence, transcriptions, and personnel matters. i have a broad understanding of Medicare, Medicaid, and various private insurance companies. i think this gives me a good perspective on some of the issues that are faced by the hospital and employees. Since 2009 i have worked as a case manager, working with seniors, their families, and the wide ariety of community based services available to people needing assistance. i have worked with clients in Juneau, Angoon, and Haines. My experience on boards dates back to around 2006 and i have served on a variety of board since that time: The Glory Hall, Juneau Commission on Aging, AARP Juneau Action Team, Cancer Connection, and two different church boards. Our hospital has been through a lot of challenges and changes the past few years and i think my background and experience could be helpful in the decisions that are required on a regular basis.

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.**

JEPC Cancer Connection AARP Juneau Action Team Older Persons' Action Group

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

i have been employed at Catholic community Service since 2009 as a case manager for SE Senior Services. Glory Hall Board - 9 years JCOA - 4 years AARP - 5 years

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

BLA in Alaska Studies, UAS-Juneau 1992.

**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.**

First Aid/CPR current

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## 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

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## 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

Eileen G Hosey