

Boards and Commissions - Applicant Information

Printed Date: 06-22-2010

Prefix: UNDECLARED **Last Name:** LOBATO-FOX **First Name:** MONICA **Middle Name:**
Applicant\Appointee Record Id: 2803 **Date Last Modified:** March-28-2007 04:33:16 AM MDT **App Deleted Flag:**
Occupation: TEACHER FACILITATOR
Employer: DENVER PUBLIC SCHOOLS
Work Email:
Work Address: 2950 JASMINE STREET
Work City: DENVER **Work State:** CO **Work Zip:** 80207 **Work Zip Ext:**
Work Phone: 303-525-3296 **Work Phone Ext:** **Work Fax:** 720-424-6525 **Work Cell Phone:** 303-525-3296
Home Email: LENANDMONFOX@MSN.COM
Home Address: 17573 E. EUCLID AVENUE
Home City: AURORA **Home State:** CO **Home Zip:** 80016 **Home Zip Ext:**
Home Phone: 303-627-0745 **Home Cell Phone:** 303-525-3296
Birth Date: July-04-2776 12:00:0 **Gender:** FEMALE **Ethnicity:** HISPANIC **GLBT:** UNDECLARED
City Council District: UNDECLARED **City Council Other:**
Registered Voter: YES **Registered County:** ARAPAHOE **Political Affiliation:** UNDECLARED
Education Level: MASTERS **Year Completed:** 1981
Experience: EDUCATION/YOUTH **Interest:** EDUCATION/YOUTH **Confidence:** NO
Confidence Extension:
City Employed: NO **Date Submitted:** March-28-2007 04:33:16 AM MDT

Boards Applying For:

DENVER PRE-SCHOOL PROGRAM BOARD OF ADVISORS

References

Reference 1: First Name: KIMBERLY **Last Name:** KELLY **Phone:** 303-717-9347
Reference 2: First Name: JANE **Last Name:** WALSH **Phone:** 720-423-8209
Reference 3: First Name: ANN **Last Name:** CLARK **Phone:** 303-936-3466

Skills, Activities, Memberships, Resume/Cover Letter:

NATIONAL ASSOCIATION OF THE EDUCATION OF YOUNG CHILDREN, DCTA-CEA-NEA, FOX HOLLOW IN CHERRY CREEK SCHOOL DISTRICT

Board Assignment Information:

Relation Id: 3677 **BoardName:** DENVER PRE-SCHOOL PROGRAM BOARD OF ADVISORS **Delete Flag:** N
Status: MEMBER **Reason:** APPOINTED **Start Date:** 03-12-2007 **End Date:** NONE **Tech Date:** 03-12-2010
Resolution: 42 2007 **Addendum:**

Boards and Commissions - Applicant Information

Printed Date: 06-22-2010

Prefix: UNDECLARED **Last Name:** MCCABE **First Name:** LONNIE **Middle Name:**
Applicant/Appointee Record Id: 2748 **Date Last Modified:** February-16-2007 02:01:43 AM MST **App Deleted Flag:**
Occupation:
Employer:
Work Email:
Work Address:
Work City: **Work State:** CO **Work Zip:** **Work Zip Ext:**
Work Phone: **Work Phone Ext:** **Work Fax:** **Work Cell Phone:**
Home Email:
Home Address: 1253 JACKSON STREET
Home City: DENVER **Home State:** CO **Home Zip:** 80206 **Home Zip Ext:**
Home Phone: **Home Cell Phone:**
Birth Date: July-04-2776 12:00:0 **Gender:** UNDECLARED **Ethnicity:** UNDECLARED **GLBT:** UNDECLARED
City Council District: 10 **City Council Other:**
Registered Voter: UNDECLARED **Registered County:** **Political Affiliation:** UNDECLARED
Education Level: **Year Completed:**
Experience: UNDECLARED **Interest:** UNDECLARED **Confidence:** UNDECLARED
Confidence Extension:
City Employed: UNDECLARED **Date Submitted:** February-16-2007 02:01:43 AM MST

Boards Applying For:

DENVER PRE-SCHOOL PROGRAM BOARD OF ADVISORS

References

Reference 1: First Name: **Last Name:** **Phone:**

Reference 2: First Name: **Last Name:** **Phone:**

Reference 3: First Name: **Last Name:** **Phone:**

Skills, Activities, Memberships, Resume/Cover Letter:

Board Assignment Information:

Relation Id: 3445 **BoardName:** DENVER PRE-SCHOOL PROGRAM BOARD OF ADVISORS **Delete Flag:** N

Status: MEMBER **Reason:** APPOINTED **Start Date:** 03-12-2007 **End Date:** NONE **Tech Date:** 03-12-2010

Resolution: 42 2007 **Addendum:**

Boards and Commissions - Applicant Information

Printed Date: 06-22-2010

Prefix: MR. **Last Name:** REICHERT **First Name:** E **Middle Name:** LEE

Applicant/Appointee Record Id: 1998 **Date Last Modified:** August-03-2006 09:22:10 AM MDT **App Deleted Flag:**

Occupation: ATTORNEY

Employer: KAMLET SHEPARD & REICHERT, LLP

Work Email: LREICHERT@KSRLAW.COM

Work Address: 1515 ARAPAHOE SUITE 1600

Work City: DENVER **Work State:** CO **Work Zip:** 80202 **Work Zip Ext:**

Work Phone: 303-825-4200 **Work Phone Ext:** **Work Fax:** 303-825-1185 **Work Cell Phone:**

Home Email: REICHERTLEE@YAHOO.COM

Home Address: 845 MILWAUKEE

Home City: DENVER **Home State:** CO **Home Zip:** 80206 **Home Zip Ext:**

Home Phone: 303-321-2632 **Home Cell Phone:** 7520-273-1594

Birth Date: July-04-2776 12:00:0 **Gender:** MALE **Ethnicity:** CAUCASIAN **GLBT:** UNDECLARED

City Council District: 10 **City Council Other:**

Registered Voter: YES **Registered County:** DENVER **Political Affiliation:** UNDECLARED

Education Level: JD **Year Completed:** 1992

Experience: ECONOMIC DEVELOPMENT **Interest:** ECONOMIC DEVELOPMENT **Confidence:** NO

Confidence Extension:

City Employed: NO **Date Submitted:** October-18-2005 09:58:11 AM MDT

Boards Applying For:

ETHICS BOARD OF

JUDICIAL NOMINATION COMMISSION DENVER COUNTY COURT

References

Reference 1: First Name: WILLIE **Last Name:** SHEPHARD **Phone:** 303-825-4200

Reference 2: First Name: WILLIAM **Last Name:** HON ERICKSON **Phone:** 303-789-0333

Reference 3: First Name: PENFIELD **Last Name:** HON. TATE **Phone:** 303-839-1572

Skills, Activities, Memberships, Resume/Cover Letter:

SUPER LAWYERS

DENVER BUSINESS JOURNAL 40 UNDER 40

LIFE MEMBER OF THE AMERICAN LAW INSTITUTE

Board Assignment Information:

Relation Id: 3444 **BoardName:** DENVER PRE-SCHOOL PROGRAM BOARD OF ADVISORS **Delete Flag:** N

Status: MEMBER **Reason:** APPOINTED **Start Date:** 03-12-2007 **End Date:** NONE **Tech Date:** 03-12-2010

Resolution: 42 2007 **Addendum:**

Boards and Commissions - Applicant Information

Printed Date: 06-22-2010

Prefix: UNDECLARED **Last Name:** WIRTZFELD **First Name:** CAREY **Middle Name:**

Applicant/Appointee Record Id: 2737 **Date Last Modified:** February-16-2007 12:26:26 PM MST **App Deleted Flag:**

Occupation:

Employer:

Work Email:

Work Address:

Work City: **Work State:** CO **Work Zip:** **Work Zip Ext:**

Work Phone: **Work Phone Ext:** **Work Fax:** **Work Cell Phone:**

Home Email:

Home Address: 5815 W. PORTLAND

Home City: LITTLETON **Home State:** CO **Home Zip:** 80128 **Home Zip Ext:**

Home Phone: **Home Cell Phone:**

Birth Date: July-04-2776 12:00:0 **Gender:** UNDECLARED **Ethnicity:** UNDECLARED **GLBT:** UNDECLARED

City Council District: UNDECLARED **City Council Other:**

Registered Voter: UNDECLARED **Registered County:** **Political Affiliation:** UNDECLARED

Education Level: **Year Completed:**

Experience: UNDECLARED **Interest:** UNDECLARED **Confidence:** UNDECLARED

Confidence Extension:

City Employed: UNDECLARED **Date Submitted:** February-16-2007 12:26:26 PM MST

Boards Applying For:

DENVER PRE-SCHOOL PROGRAM BOARD OF ADVISORS

References

Reference 1: First Name: **Last Name:** **Phone:**

Reference 2: First Name: **Last Name:** **Phone:**

Reference 3: First Name: **Last Name:** **Phone:**

Skills, Activities, Memberships, Resume/Cover Letter:

Board Assignment Information:

Relation Id: 3447 **BoardName:** DENVER PRE-SCHOOL PROGRAM BOARD OF ADVISORS **Delete Flag:** N

Status: MEMBER **Reason:** APPOINTED **Start Date:** 03-12-2007 **End Date:** NONE **Tech Date:** 03-12-2010

Resolution: 42 2007 **Addendum:**

BOARDS AND COMMISSIONS APPLICATION



Please complete the following information in full,
attach a cover letter, current resume or biography and return to the address below.

Type or print in blue or black ink.

Board or Commission you are applying for: *Denver Preschool Program Board of Advisors*

Last Name: *Enriquez-Olmos* First Name: *Mariana*

Occupation/Employer: *Director of Education Research, Center for Research Strategies*

Work Address: *225 East 16th Avenue, Suite 1150* City: *Denver* Zip: *80203*

Work E-mail Address: *mariana.enriquez@crsllc.org*

Work Phone: *303-860-1705* Work/Home Fax: *303-860-1706*

Home Address: *2963 S. Wabash St.* City: *Denver* Zip: *80231*

Home Phone: *303-755-4491* Cell Phone/ Pager:

Home E-mail Address: *marianaenriquez@hotmail.com*

Are you a registered voter? Yes No If so, what county? _____

Denver City Council District No.: *4* Ethnicity (Optional) _____

Highest Level of Education or Degree Earned: *Ph.D.* Year Completed: *2002*

Memberships/ Organizations/ Volunteer Activities (include past or present):

American Evaluation Association

American Educational Research Association

Behavioral and Social Science Volunteer (BSSV) Program network of the American Psychological Association

References (List three persons, not related to you, whom you have known at least one year):

Name	Address	Phone Number
<i>Carla Frenzel, M.A.</i>	<i>900 Grant St., Room 600, Denver, CO 80203</i>	<i>720-423-3539</i>
<i>Lydia Prado, Ph.D.</i>	<i>4141 E. Dickenson Place, Denver, CO 80222</i>	<i>303-504-6647</i>
<i>Judy Martinez, M.A.</i>	<i>201 E. Colfax Ave., Denver, CO 80203</i>	<i>303-866-6127</i>

Special Information:

Is there anything that would adversely affect public confidence in your appointment or service? Yes No
If yes, please explain on a separate sheet of paper.

Signature

Date

Return Completed Form to:

Anthony R. Aragon, Director of Boards and Commissions
City and County of Denver Building, Room 350
Denver, CO 80202 Phone: (720) 865-9034 Fax: (720) 865-8787
anthony.aragon@ci.denver.co.us

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11/16/09

BOARDS AND COMMISSIONS APPLICATION

Please complete the following information in full,
attach a cover letter, current resume or biography and return to the address below.

Type or print in blue or black ink.

Board or Commission you are applying for: ~~Commission on Aging~~

Last Name: C.de Baca First Name: Betty

Occupation/Employer: Program Administrator Denver Department of Human Services

Work Address: 1200 Federal Blvd. City: Denver Zip: 80204

Work E-mail Address: betty.cdebaca@denvergov.org

Betty@coparentcoalition.org

Work Phone: 720-944-2069 Work/Home Fax: 720-944-4138

Home Address: 1708 Depew Street City: Edgewater Zip: 80214

Home Phone: 303-233-2728 Cell Phone/ Pager: 720-837-0091

Home E-mail Address: bettycdebaca@mn.com

Are you a registered voter? Yes No If so, what county? Jefferson

Denver City Council District No.: _____ Ethnicity (Optional) Hispanic

Highest Level of Education or Degree Earned: MA Year Completed 1983

Memberships/ Organizations/ Volunteer Activities (include past or present):

Early Childhood Council Advisory Team

Delta Kappa Gamma Society International

Colorado Statewide Parents Coalition

References (List three persons, not related to you, whom you have known at least one year):

Name	Address	Phone Number
<u>Dr. Maria Guajardo</u>	<u>201 W. Colfax</u>	<u>720-913-0906</u>
<u>Dr Evangeline Sena</u>		<u>303-279-3991</u>
<u>Juanita Rios Johnston</u>	<u>1200 Federal</u>	<u>720-944-2900</u>

Special Information:

Is there anything that would adversely affect public confidence in your appointment or service? Yes No
If yes, please explain on a separate sheet of paper.

Signature

Date

Return Completed Form to:

Suzan Moore, Director of Boards and Commissions
City and County of Denver Building, Room 350
Denver, CO 80202 Phone: (720) 865-9034 Fax: (720) 865-8787
Suzan.moore@denvergov.org