

## **BAC-9246**

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Contact Information	on		
Contact Name	Michaely Rosas	Home Address	
Preferred Phone		Home City	Parker
Preferred Email		Home State	co
Other Phone		Home Zip	80134
Other Email		County	Parker
DOB		Hispanic or Latino origin or Descent?	No
SSN		Race/Ethnicity	Caucasian
Gender	Female	Other Ethnicity	
Other Gender		Sallutation	Mrs.
oard Information	1		
Board Name	Denver Immigrant and Refugee Commission	Other boards or commissions served	I
Status	New	Resigned	
Term Start Date			
Term End Date			
Vork Information			
Employer	Aurora Mental Health & Recovery (formerly APDC)	Work Address	1537 Alton Street
Position	Adult Education Director	Work City	Aurora
Business Phone #		Work State	CO
Work Email		Work Zip	80010
Additional Informa	ation		
re you a registered voter?	Yes	Objection to appointment?	No I
f so, what county?	Douglas	Special Information	
enver City Council District No	N/A	Registered Lobbyist	No
Conflict of Interest Explanation		Conflict of Interest	No
ducation and Ge	neral Qualifications		
me of High School	Rangeview High School	Name of Graduate	_University of Colorado

**Location of Graduate** 

School

Denver, CO

Aurora, CO

Location of High

School

# of Years Attended **Graduate School** 

**Graduate Major** 

Did you Graduate Nο

Spanish

Name of College University of Colorado

**Location of College** Denver, CO

# of Years Attended

College

Did you Graduate Yes

College

**Undergrad Major** International Relations & Business

## **Reference Details**

Reference Name #1 Ron Levis Reference Phone #1 Reference Name #2 Deborah Yim Reference Phone #2 Reference Name #3 Harry Budisidharta Reference Phone #3 Agree to a background check

Reference Email #1 Reference Address #1

Reference Email #2

Reference Address #2

Reference Email #3

Reference Address #3

Created By

Denver Integration, 2/5/2024 4:49 AM

**Last Modified By** Denver Integration, 2/5/2024 4:49 AM

## **Notes & Attachments**

MR headshot, JPG Michaely Rosas Resume 2024.pdf

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Description

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