

ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team
at MileHighOrdinance@DenverGov.org by **3:00pm on Monday**.

All fields must be completed.

Incomplete request forms will be returned to sender which may cause a delay in processing.

Date of Request: April 30, 2015

Please mark one: Bill Request or Resolution Request

1. Has your agency submitted this request in the last 12 months?

Yes No

If yes, please explain:

2. Title: *(Include a concise, one sentence description – please include name of company or contractor and contract control number - that clearly indicates the type of request: grant acceptance, contract execution, amendment, municipal code change, supplemental request, etc.)*

To approve the Mayoral reappointments of Dede Frain, Dawn Crosswhite, Jeffery Hoyle, Ching-Yuan Hu, Jeremiah Whitehead and the appointments of Austin Banks, Kent Webb and Lauren Polk to the Denver GLBT Commission for terms effective immediately and expiring May 1, 2017 or until a successor is duly appointed.

3. Requesting Agency: Mayor's Office

4. Contact Person: *(With actual knowledge of proposed ordinance/resolution.)*

- Name: Anthony Aragon
- Phone: 720-865-9032
- Email: anthony.aragon@denvergov.org

5. Contact Person: *(With actual knowledge of proposed ordinance/resolution who will present the item at Mayor-Council and who will be available for first and second reading, if necessary.)*

- Name: Anthony Aragon
- Phone: 720-865-9032
- Email: anthony.aragon@denvergov.org

6. General description of proposed ordinance including contract scope of work if applicable:

[Insert general description here.]

****Please complete the following fields:** *(Incomplete fields may result in a delay in processing. If a field is not applicable, please enter N/A for that field – please do not leave blank.)*

- a. **Contract Control Number:**
- b. **Duration:** Terms effective immediately and expiring May 1, 2017
- c. **Location:**
- d. **Affected Council District:**
- e. **Benefits:**
- f. **Costs:**

7. Is there any controversy surrounding this ordinance? *(Groups or individuals who may have concerns about it?) Please explain.*

[Start typing here.]

To be completed by Mayor's Legislative Team:

SIRE Tracking Number: _____

Date Entered: _____

Boards and Commissions - Applicant Information

Printed Date: 04-30-2015

Prefix: UNDECLARED **Last Name:** FRAIN **First Name:** DEDE **Middle Name:**
Applicant/Appointee Record Id: 4032 **Date Last Modified:** October-14-2014 08:36:04 AM MDT **App Deleted Flag:**
Occupation: SELF EMPLOYED
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: DEDEFRAIN@GMAIL.COM
Home Address: 4435 STUART STREET
Home City: DENVER **Home State:** CO **Home Zip:** 80212 **Home Zip Ext:**
Home Phone: **Home Cell Phone:** 303-475-4620
Birth Date: July-04-2776 12:00:0 **Gender:** FEMALE **Ethnicity:** CAUCASIAN **GLBT:** YES
City Council District: 1 **City Council Other:**
Registered Voter: YES **Registered County:** DENVER **Political Affiliation:** UNDECLARED
Education Level: **Year Completed:**
Experience: UNDECLARED **Interest:** UNDECLARED **Confidence:** UNDECLARED
Confidence Extension:
City Employed: UNDECLARED **Date Submitted:** October-14-2014 08:36:04 AM MDT

Boards Applying For:

GLBT COMMISSION DENVER

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: 5343 **BoardName:** GLBT COMMISSION DENVER **Delete Flag:** N
Status: MEMBER **Reason:** APPOINTED **Start Date:** 10-13-2014 **End Date:** NONE **Tech Date:** 05-01-2015
Resolution: 0811 2014 **Addendum:**

Boards and Commissions - Applicant Information

Printed Date: 04-30-2015

Prefix: UNDECLARED **Last Name:** CROSSWHITE **First Name:** DAWN **Middle Name:**

Applicant/Appointee Record Id: 3784 **Date Last Modified:** July-16-2013 10:05:32 AM MDT **App Deleted Flag:**

Occupation: SOCIAL WORKER

Employer: DEPARTMENT OF HUMAN SERVICES

Work Email:

Work Address: 1200 FEDERAL BOULEVARD

Work City: DENVER **Work State:** CO **Work Zip:** 80204 **Work Zip Ext:**

Work Phone: 720-944-6057 **Work Phone Ext:** **Work Fax:** **Work Cell Phone:**

Home Email: DAWN.CROSSWHITE@DENVERGOV.ORG

Home Address: 3446 HUMBOLDT STREET

Home City: DENVER **Home State:** CO **Home Zip:** 80205 **Home Zip Ext:**

Home Phone: **Home Cell Phone:** 303-518-7316

Birth Date: July-04-2776 12:00:0 **Gender:** FEMALE **Ethnicity:** CAUCASIAN **GLBT:** YES

City Council District: 8 **City Council Other:**

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

Education Level: **Year Completed:**

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

Confidence Extension:

City Employed: YES **Date Submitted:** July-16-2013 10:05:32 AM MDT

Boards Applying For:

GLBT COMMISSION DENVER

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: 5042 **BoardName:** GLBT COMMISSION DENVER **Delete Flag:** N

Status: MEMBER **Reason:** APPOINTED **Start Date:** 07-15-2013 **End Date:** NONE **Tech Date:** 05-01-2015

Resolution: 0435 2013 **Addendum:**

Boards and Commissions - Applicant Information

Printed Date: 04-30-2015

Prefix: UNDECLARED **Last Name:** HOYLE **First Name:** JEFFERY **Middle Name:**
Applicant/Appointee Record Id: 3656 **Date Last Modified:** July-18-2012 09:24:21 AM MDT **App Deleted Flag:**
Occupation: CHIEF ADVISOR OWNER
Employer: EMPHASIS MARKETING & COMMUNICATIONS, LLC
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: JWHOYLE@HOTMAIL.COM
Home Address: POB 44002
Home City: DENVER **Home State:** CO **Home Zip:** 80201 **Home Zip Ext:**
Home Phone: **Home Cell Phone:** 303-946-8619
Birth Date: July-04-2776 12:00:0 **Gender:** MALE **Ethnicity:** AFRICAN AMERICAN **GLBT:** YES
City Council District: UNDECLARED **City Council Other:**
Registered Voter: YES **Registered County:** DENVER **Political Affiliation:** UNDECLARED
Education Level: **Year Completed:**
Experience: UNDECLARED **Interest:** UNDECLARED **Confidence:** UNDECLARED
Confidence Extension:
City Employed: UNDECLARED **Date Submitted:** June-28-2012 07:00:31 AM MDT

Boards Applying For:

GLBT COMMISSION DENVER

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: 4886 **BoardName:** GLBT COMMISSION DENVER **Delete Flag:** N

Status: MEMBER **Reason:** REAPPOINTED **Start Date:** 05-13-2013 **End Date:** NONE **Tech Date:** 05-01-2015

Resolution: 0284 2013 **Addendum:** REAPPT

Boards and Commissions - Applicant Information

Printed Date: 04-30-2015

Prefix: UNDECLARED **Last Name:** HU **First Name:** CHING-YUAN **Middle Name:**
Applicant/Appointee Record Id: 3776 **Date Last Modified:** May-28-2013 07:32:28 AM MDT **App Deleted Flag:**
Occupation: GENERAL MANAGER
Employer: EDEN
Work Email:
Work Address: 3090 DOWNING STREET
Work City: DENVER **Work State:** CO **Work Zip:** 80205 **Work Zip Ext:**
Work Phone: 720-545-4055 **Work Phone Ext:** **Work Fax:** **Work Cell Phone:**
Home Email: CHEFCHINGY@GMAIL.COM
Home Address: 3353 ARAPAHOE STREET
Home City: DENVER **Home State:** CO **Home Zip:** 80205 **Home Zip Ext:**
Home Phone: **Home Cell Phone:** 319-270-5883
Birth Date: July-04-2776 12:00:0 **Gender:** FEMALE **Ethnicity:** ASIAN **GLBT:** YES
City Council District: 8 **City Council Other:**
Registered Voter: YES **Registered County:** DENVER **Political Affiliation:** UNDECLARED
Education Level: **Year Completed:**
Experience: UNDECLARED **Interest:** UNDECLARED **Confidence:** UNDECLARED
Confidence Extension:
City Employed: UNDECLARED **Date Submitted:** May-28-2013 07:32:28 AM MDT

Boards Applying For:

GLBT COMMISSION DENVER

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: 5026 **BoardName:** GLBT COMMISSION DENVER **Delete Flag:** N

Status: MEMBER **Reason:** APPOINTED **Start Date:** 05-13-2013 **End Date:** NONE **Tech Date:** 05-01-2015

Resolution: 0284 2013 **Addendum:**

Boards and Commissions - Applicant Information

Printed Date: 04-30-2015

Prefix: UNDECLARED **Last Name:** WHITEHEAD **First Name:** JEREMIAH **Middle Name:**
Applicant/Appointee Record Id: 3777 **Date Last Modified:** May-28-2013 07:41:27 AM MDT **App Deleted Flag:**
Occupation: GENERAL MANAGER
Employer: AVEDA ACADEMY DENVER
Work Email:
Work Address: 1650 MARKET STREET
Work City: DENVER **Work State:** CO **Work Zip:** 80202 **Work Zip Ext:**
Work Phone: 303-892-8922 **Work Phone Ext:** **Work Fax:** **Work Cell Phone:**
Home Email: JWHITE2382@YAHOO.COM
Home Address: 1260 HUMBOLDT STREET
Home City: DENVER **Home State:** CO **Home Zip:** 80218 **Home Zip Ext:**
Home Phone: **Home Cell Phone:** 720-240-8587
Birth Date: July-04-2776 12:00:0 **Gender:** MALE **Ethnicity:** AFRICAN AMERICAN **GLBT:** YES
City Council District: UNDECLARED **City Council Other:**
Registered Voter: YES **Registered County:** DENVER **Political Affiliation:** UNDECLARED
Education Level: **Year Completed:**
Experience: UNDECLARED **Interest:** UNDECLARED **Confidence:** UNDECLARED
Confidence Extension:
City Employed: UNDECLARED **Date Submitted:** May-28-2013 07:41:27 AM MDT

Boards Applying For:

GLBT COMMISSION DENVER

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: 5028 **BoardName:** GLBT COMMISSION DENVER **Delete Flag:** N

Status: MEMBER **Reason:** APPOINTED **Start Date:** 05-13-2013 **End Date:** NONE **Tech Date:** 05-01-2015

Resolution: 0284 2013 **Addendum:**

BOARDS AND COMMISSIONS APPLICATION



Please complete the following information in full, 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: GLBT Commission
Last Name: Banks First Name: Austin
Occupation/Employer: MSU Denver Student Advisory Committee Representative
Work Address: 900 Auraria Pkwy #314 City: Denver Zip: 80204
Work E-mail Address: Abanks7@msudenver.edu
Work Phone: _____ Work/Home Fax: _____
Home Address: 1472 S. Vaughn Cir City: Aurora Zip: 80012
Home Phone: 720 539 5650 Cell Phone/ Pager: _____
Home E-mail Address: AKBank12@gmail.com
Are you a registered voter? Yes No If so, what county? Arapahoe
Colorado ID or Driver's License Number: 12-177-0761
Denver City Council District No.: N/A Ethnicity Irish
Highest Level of Education or Degree Earned: Bachelors Year Completed: 2015
Memberships/ Organizations/ Volunteer Activities (include past or present):
National Society of Collegiate Scholars 2013-14 President
Proudly Speaking GLBT Toastmasters 2013-14
Creating Change 2015 Host Committee 2013-14
References (List three persons, not related to you, whom you have known at least one year):

Name	Address	Phone Number
<u>Dr. Amy Eckert</u>	<u>1033 9th St.</u>	<u>303-566-3156</u>
<u>Jerry Mason</u>	<u>900 Auraria Pkwy</u>	<u>303-566-8054</u>
<u>Dr. Tara Tull</u>		<u>303-556-2978</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.

Austin Banks
Signature

4/20/2015
Date

Return Completed Form to:

Anthony R. Aragon, Director of Boards and Commissions
1437 Bannock Street, Room 350
Denver, CO 80202 Phone: (720) 865-9032 Fax: (720) 865-8787
anthony.aragon@denvergov.org

KENT E. WEBB, LCSW
The Practice of Inclusion, LLC
950 S. Cherry Street, Suite 918
DENVER, CO 80246
303-394-4910
kent@kentwebb.com
www.kentwebb.com

QUALIFICATIONS

- Provided psychotherapy and mental health services to adults, families, adolescents and children for 30 years in a variety of clinical settings (private practice, acute psychiatric hospital, child/adolescent psychiatric residential treatment center, medical hospital, emergency room, community mental health center and Colorado Department of Human Services).
- 15 year history of executive management and budgetary experience in the human service field as co-owner of an out-patient, behavioral health group practice with 7 clinical service offices in Metro Denver. Responsibilities included: providing clinical service and oversight; contract management; and provider recruitment.
- Clinical and administrative supervisor of 20 mental health professionals, 7 administrative staff and a 100 members, mental health, multi-disciplinary professional provider network for 15 years.
- Clinical and Program Consultation and Training services provided to non-profit, community service agencies, national corporations and professional associations for 30 years.

PROFESSIONAL EXPERIENCE (listed most recent to past)

- Psychotherapist, private sector, Denver, Colorado
Adult individual and couples psychotherapy
A referral source for health care practitioners to provide mental health assessments, recommendations, psychotherapy and to assist in coordinating the mental/physical health care of the referred patient.
Specialty services for GLBT clients.

Behavioral Health Consultant, Supervisor and Trainer

Consultant

Denver Center for Crime Victims

Community Alternatives Inc.

Adams Department of Human Services/Crisis Team

Jefferson Center for Mental Health/Crisis Team

Behavioral Healthcare Trainer

Healthcare Perspective

Department of Mental Health, District of Columbia, Washington D.C.

Corporate Trainer

Coors Brewing Company

QWEST

Hartford Ins. Co.

National Bar Association

- **Psychotherapy Provider Network, P.C.**
Chief Executive Officer, President, Principle
Areas of Responsibility:
 - Policy and clinical program development for a group mental health practice.
 - Oversaw a \$1,000,000 budget.
 - Managed eight contracts with major national health plans (i.e., Kaiser, HMO Colorado, Cigna, United Healthcare, PacifiCare, and two large family practice groups in Metro Denver).
 - Clinical Director and Supervisor of Clinical and Administrative Staff providing service to 3,000 new clients per year.

- **Clinical Social Worker/Psychiatric Liaison Service**
National Jewish Medical Center

- **Faculty Affiliate**
University of Denver, School of Professional Psychology Co-instructed the Family Therapy Seminar and clinically supervised doctoral students

- Clinical Social Worker
 - Adams Community Mental Health Center
 - Westminster Adult/Child Team
 - Senate Bill 26 Intensive Family Treatment Team
 - Adams Dept. of Human Services Multi-disciplinary Review Team
- Treatment Team Leader/Clinical Social Worker
 - Cleo Wallace Center for Children and Adolescents, a Residential Treatment Center, provided direct treatment services, supervised childcare staff and interfaced with Departments of Human Services regarding progress, termination of parental rights and placement issues within a Residential Treatment Center.

EDUCATION

- Master of Social Work, University of Kansas, School of Social Welfare
- Bachelor of Music Education-Therapy (BME-T), University of Kansas, School of Education

POST-GRADUATE TRAINING

- Georgetown University Medical School, Department of Psychiatry, The Family Center, Family Systems Theory and Family Psychotherapy, Murray Bowen, M.D., Director
- University of Colorado
Stress Management and Biofeedback Training Program

LICENSURE

- Licensed Clinical Social Worker, State of Colorado

BOARDS AND COMMISSIONS APPLICATION



Please complete the following information in full,
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: GLBT COMMISSION

Last Name: POIK First Name: LAUREN

Occupation/Employer: ATTORNEY U.S. DEPARTMENT OF LABOR

Work Address: 1244 Speer Blvd #216 City: Denver Zip: 80204

Work E-mail Address: poik.lauren.a@dol.gov

Work Phone: (303) 844-0820 Work/Home Fax: (303) 844-0982

Home Address: 1460 Little Raven St City: Denver Zip: 80202
Unit 3-310

Home Phone: _____ Cell Phone/ Pager: 202-531 4965

Home E-mail Address: AlexandraPoik618@gmail.com

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

Colorado ID or Driver's License Number: 141640914

Denver City Council District No.: _____ Ethnicity African American

Highest Level of Education or Degree Earned: J.D. Year Completed: 2006

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

SAM Carey Bar, Colorado Women's Bar, Colorado GLBT Bar

George Washington African American Alumni Board

Georgetown Alumni Admissions Board

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

Name	Address	Phone Number
<u>Greg Tronson</u>	<u>1244 Speer Blvd Suite 216 Denver CO</u>	<u>(303) 844-1758</u>
<u>Letha Miller</u>	<u>257 Mary Beth Rd Evergreen CO</u>	<u>80439 (202) 465-2653</u>
<u>Valerie Schneider</u>	<u>1887 Newton St NW Washington DC</u>	<u>20010 (617) 710-5971</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

4/5/15
Date

Return Completed Form to:

Anthony R. Aragon, Director of Boards and Commissions
1437 Bannock Street, Room 350
Denver, CO 80202 Phone: (720) 865-9032 Fax: (720) 865-8787
anthony.aragon@denvergov.org