

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: July 7, 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 appointments of Shanae Adams and Cody Ortiz-Oldham 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 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: GIBT
Last Name: Adams First Name: Shanae
Occupation/Employer: Visiting Nurse Association - CNA
Work Address: 390 Grant St City: Denver Zip: 80203
Work E-mail Address: _____
Work Phone: _____ Work/Home Fax: _____
Home Address: 4653 S Boulder City: Aurora Zip: 80015
Home Phone: _____ Cell Phone/ Pager: 720-938-3082
Home E-mail Address: 19504918@gmail.com
Are you a registered voter? Yes No If so, what county? _____
Colorado ID or Driver's License Number: 99-168-0124

Denver City Council District No.: _____ Ethnicity Blk
Highest Level of Education or Degree Earned: B.A Sociology Year Completed: 4

Memberships/ Organizations/ Volunteer Activities (include past or present):
NAAAP, Sexual Health Advocate Peer Education, Relationship & sexual violence prevention center, National LGBTQ task force

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

Name	Address	Phone Number
<u>Jess Jackson</u>	<u>Columbia Mo</u>	<u>573-882-6621</u>
<u>Cassandra Aldridge</u>	<u>Aurora CO</u>	<u>303-668-6105</u>
<u>Sassy Cosby</u>	<u>Columbia Mo</u>	<u>913-972-7915</u>

Special Information:

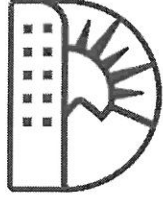
Is there anything that would adversely affect public confidence in your appointment or service? Yes No
If yes, please explain on a separate sheet of paper.

Shanae Adams 5/14/15
Signature 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

BOARDS AND COMMISSIONS APPLICATION



DENVER THE MILE HIGH CITY

Please complete the following information in full and return with your current resume or biography to the address below.

Type or print in blue or black ink.

Board or Commission you are applying for: GLBT Commission

Last Name: Ortiz-Oldham First Name: Cody

Occupation/Employer: Community Outreach Liaison & Diversity Trainer – Red Rocks Community College

Work Address: 13300 W. 6th Avenue City: Lakewood Zip: 80228

Work E-mail Address: cody.oldham@rrcc.edu

Work Phone: (303) 914-6126 Work/Home Fax: N/A

Home Address: 10555 W. Jewell Ave. #11-107 City: Lakewood Zip: 80232

Home Phone: (720) 882-1330 Cell Phone/ Pager: (same)

Home E-mail Address: oldhamc@gmail.com

Are you a registered voter? Yes If so, what county? Jefferson

Colorado ID or Driver's License Number: 95-159-1223

Denver City Council District No.: _____ Ethnicity Latino/Native American

Highest Level of Education or Degree Earned: Associate's Degree Year Completed: 2014
(Graduation with Bachelor's of Science in Applied Psychology in May 2016)

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

Longtime volunteer and educational counselor at multiple agencies including The Action Center, Urban Peak, The Denver Indian Center and many others. Also a community diversity trainer on issues involving race, GLBT diversity, the Transgender community and Intersectionality.

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

Name	Address	Phone Number
Maryann Touitou	Red Rocks Community College	(303) 914-6517
Brooke Degroat	The Action Center	(303) 237-7704
Renata Heberton	The Action Center	(303) 237-7704

Special Information:

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

Cody Ortiz-Oldham 6/9/15
Signature Date

Return Completed Form to:

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1437 Bannock Street, Room 350
Denver, CO 80202 Phone: (720) 865-9032 Fax: (720) 865-8787
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