# **Boards and Commissions - Applicant Information**

Printed Date: 09-29-2016

Prefix: UNDECLARED Last Name: HINDS First Name: CHRIS Middle Name:

Applicant\Appointee Record Id: 4086 Date Last Modified: January-15-2015 09:51:05 AM MST App Deleted Flag:

Occupation: RETIRED

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: CHRIS@CHRISHINDS.COM

Home Address 1950 LOGAN STREET 902

Home City: DENVER Home State: CO Home Zip: 80203 Home Zip Ext:

Home Phone: 303-717-9174 Home Cell Phone:

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: Year Completed:

Experience: UNDECLARED Interest: UNDECLARED Confidence: UNDECLARED

Confidence Extension:

City Employed: UNDECLARED Date Submitted: January-15-2015 09:51:05 AM MST

**Boards Applying For:** 

PEOPLE WITH DISABILITIES COMMISSION FOR

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: 5413 BoardName: PEOPLE WITH DISABILITIES COMMISSION FOR Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 01-12-2015 End Date: NONE Tech Date: 09-30-2016

Resolution: 1118 2014 Addendum:

Date Printed: 09-29-2016 Page 1 of 1

# **Boards and Commissions - Applicant Information**

Printed Date: 09-29-2016

Prefix: UNDECLARED Last Name: KING First Name: JACKIE Middle Name:

Applicant\Appointee Record Id: 4087 Date Last Modified: January-15-2015 09:57:02 AM MST App Deleted Flag:

Occupation: FACULTY

**Employer: COMMUNITY COLLEGE OF DENVER** 

Work Email:

Work Address: BOX 173363

Work City: DENVER Work State: CO Work Zip: 80217 Work Zip Ext:

Work Phone: 303-352-4019 Work Phone Ext: Work Fax: Work Cell Phone:

Home Email: JACKIE.KING@CCD.EDU

Home Address: \$18 WALNUT STRE

Home City DENVER Home State: CO Home Zip 80204 Home Zip Ext:

Home Phone: Home Cell Phone: 720-381-3314

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

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: January-15-2015 09:57:02 AM MST

#### **Boards Applying For:**

PEOPLE WITH DISABILITIES COMMISSION FOR

### 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: 5414 BoardName: PEOPLE WITH DISABILITIES COMMISSION FOR Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 01-12-2015 End Date: NONE Tech Date: 09-30-2016

Resolution: 0004 2015 Addendum:

Date Printed: 09-29-2016 Page 1 of 1