

# Commission on Aging

City of Alexandria, VA | Generated 6/2/2025 @ 4:02:40 PM by OnBoardGOV - Powered by ClerkBase

Applicant	Date	Address	Contact	Status
Dr Virginia Bixby Kalish	2/24/2025	Yes, I am a resident of the City of Alexandria. (NOTE: If your answer is no, a residency waiver is required for positions that are not specific to an organization or profession.): Yes		Validated
Jessica Shelly Lefevre	5/15/2025	Yes, I am a resident of the City of Alexandria. (NOTE: If your answer is no, a residency waiver is required for positions that are not specific to an organization or profession.): Yes		Validated

# Dr Virginia Bixby Kalish

City of Alexandria, VA | Generated 6/2/2025 @ 12:02 pm by OnBoardGOV - Powered by ClerkBase

## Status

**Name** Dr Virginia Bixby Kalish  
**Application Date** 2/24/2025  
**Expiration Date** 9/24/2025  
**Board Member** Virginia Bixby Kalish  
**Status** Validated

Board	Vacancies	Status	Actions
Commission on Aging	1	Contested	<input type="checkbox"/>

## Basic Information

**Name**  
Dr Virginia Bixby Kalish  
**Date of Birth**  
REDACTED

## Contact Information

**Yes, I am a resident of the City of Alexandria. (NOTE: If your answer is no, a residency waiver is required for positions that are not specific to an organization or profession.)**  
Yes  
**Email**  
REDACTED  
**Alternate email**  
REDACTED  
**Phone**  
REDACTED

## Occupation

**Employer (student and youth applicants list school)**  
Retired  
**Job Title**  
REDACTED

**New Applicant or Current Member**  
New Applicant

**What seat are you applying for? (Ex: citizen, architect, youth member, etc.)**  
Citizen

**Do you currently live in the City of Alexandria? NOTE: If your answer is no, a residency waiver is required for positions that are not specific to an organization or profession.**  
Yes

**How long have you lived in Alexandria?**  
27 years

**Statement of Interest**  
See below

**Have you ever served the City of Alexandria in any capacity?**  
No

**Have you ever attended a meeting of the Board or Commission for which you are applying?**  
No

**Are you now paid by the City of Alexandria?**  
No

**Do any of your immediate relatives or business associates now serve the City of Alexandria in any capacity?**  
No

**Attendance Requirements: Sec. 2-4-7 of the City Code requires appointees to attend at least 75% of the yearly committee meetings. Absences may be excused because of personal illness or serious illness of members of the immediate family, death of a family member, unscheduled business trips and emergency work assignments only. All other absences are recorded as unexcused. In light of the aforementioned statement, will you be able to attend at least 75% of the regular meetings of the board which you may be appointed?**  
Yes

**If applicable, will you comply with the provisions of the City's conflict of interest requirements in City Ordinance 2867 regarding the completion of a financial disclosure statement?**  
Yes

**Educational Background**  
MD

**Summary of Work and Experience**  
Medical doctor for 31 years

**References - Please list names, phone number and/or email addresses of three references that support your application.**

REDACTED

**Would you like to complete the Supplemental Questions? Non-Discrimination Data Supplemental Questions For Applications to City Boards, Commissions, and Committees Confidential - NOT FOR PUBLIC INFORMATION Completion of this section is VOLUNTARY. When completed, the section is separated and redacted from your application prior to the application's submission to City Council. COUNCIL AND STAFF DO NOT USE THIS FORM IN DETERMINING APPOINTMENTS. Information provided in this section is treated confidentially and the information is forwarded to the Alexandria Office on Human Rights for compilation of statistics.**

REDACTED

**How did you hear of this vacancy?**

REDACTED

Generated 6/2/2025 @ 12:02 pm

# Jessica Shelly Lefevre

City of Alexandria, VA | Generated 6/2/2025 @ 12:02 pm by OnBoardGOV - Powered by ClerkBase

## Status

Name	Jessica Shelly Lefevre
Application Date	5/15/2025
Expiration Date	12/15/2025
Board Member	Jessica Lefevre
Status	Validated

Board	Vacancies	Status	Actions
Commission on Aging	1	Contested (Incumbent))	<input type="checkbox"/>

## Basic Information

Name	Jessica Shelly Lefevre
Date of Birth	REDACTED

## Contact Information

**Yes, I am a resident of the City of Alexandria. (NOTE: If your answer is no, a residency waiver is required for positions that are not specific to an organization or profession.)**

Yes

**Email**

REDACTED

**Alternate email**

REDACTED

**Phone**

REDACTED

## Occupation

Employer (student and youth applicants list school)	Retired
Job Title	REDACTED

### New Applicant or Current Member

Current Member of This Board

### How many terms have you served?

1

### What seat are you applying for? (Ex: citizen, architect, youth member, etc.)

citizen

### Do you currently live in the City of Alexandria? NOTE: If your answer is no, a residency waiver is required for positions that are not specific to an organization or profession.

Yes

### How long have you lived in Alexandria?

40 years

### Statement of Interest

I am currently chairing the Committee on Economic Security and Social Engagement for the Commission on Aging

### Have you ever served the City of Alexandria in any capacity?

Yes (Please explain), Member of the Commission on Aging

### Have you ever attended a meeting of the Board or Commission for which you are applying?

Yes

### Are you now paid by the City of Alexandria?

No

### Do any of your immediate relatives or business associates now serve the City of Alexandria in any capacity?

No

Attendance Requirements: Sec. 2-4-7 of the City Code requires appointees to attend at least 75% of the yearly committee meetings. Absences may be excused because of personal illness or serious illness of members of the immediate family, death of a family member, unscheduled business trips and emergency work assignments only. All other absences are recorded as unexcused. In light of the aforementioned statement, will you be able to attend at least 75% of the regular meetings of the board which you may be appointed?

Yes

### If applicable, will you comply with the provisions of the City's conflict of interest requirements in City Ordinance 2867 regarding the completion of a financial disclosure statement?

Yes

### Educational Background

Law School

**Summary of Work and Experience**

40 years focused on human rights

**References - Please list names, phone number and/or email addresses of three references that support your application.**

REDACTED

**Would you like to complete the Supplemental Questions? Non-Discrimination Data Supplemental Questions For Applications to City Boards, Commissions, and Committees Confidential - NOT FOR PUBLIC INFORMATION** Completion of this section is **VOLUNTARY**. When completed, the section is separated and redacted from your application prior to the application's submission to City Council. **COUNCIL AND STAFF DO NOT USE THIS FORM IN DETERMINING APPOINTMENTS.** Information provided in this section is treated confidentially and the information is forwarded to the Alexandria Office on Human Rights for compilation of statistics.

REDACTED

**How did you hear of this vacancy?**

REDACTED

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