## **Personal Data Record Form**

## **Profile**

## FOR PUBLIC INFORMATION

All appointments to City Boards and Commissions are made by the City Council through the Executive Secretary for Boards and Commissions. **APPLICANTS MAY ONLY APPLY FOR ONE VACANCY AT A TIME. DUPLICATE APPLICATIONS WILL NOT BE CONSIDERED.** Please complete this application in its entirety. Your application will be forwarded to the City Council. Fill in all applicable blanks on the form. Incomplete applications will not be forwarded to City Council. All applicants are encouraged to contact the Council members and introduce themselves.

Submit Date: Jun 02, 2023

Marjorie	Leong Greenberg		
First Name	Last Name		
Email Address			
Date of Birth			
Place of Birth			
Home Address			
Street Address		Suite or Apt	
			22301 Postal Code
200			
City		State	i ostar oode
City		State	i ostal oode
City Primary Phone	Alternate Phone	State	r ostal code
	Alternate Phone	State	r ostar code
Primary Phone	Alternate Phone  Job Title	State	r ostal code
Primary Phone  OONE Employer			
Primary Phone  none Employer  Applicants may only a	Job Title		

Type of Position/Role
Family Member of Consumer Board Member
Demographics
Do you currently live in the City of Alexandria?
⊙ Yes ∩ No
If yes, how long?
5 years
Have you ever attended a meeting of the Board or Commission for which you are applying?
○ Yes ⊙ No
Have you ever served the City of Alexandria in any capacity?
⊙ Yes ○ No
If yes, please explain
I am a member of the Medical Reserve Corps for Alexandria. As a volunteer, I have helped with the Covid-19, influenza, and Monkeypox vaccination efforts at the Department of Health. I have also delivered groceries for families in Covid-19 quarantine for Alive! Food Bank.
Question applies to Community Services Board  Have you been a resident of the City of Alexandria for at least one year?
⊙ Yes ○ No
Question applies to Community Services Board  Are you a consumer (former direct recipient of public or private mental health, developmental disability, or substance abuse treatment or rehabilitation) or immediate family member of a consumer or a principal care giver who is not paid?
⊙ Yes ○ No
Question applies to Community Services Board  Are you an employee or board member of an organization which receives funding from any  Community Services Board?
○ Yes ⊙ No

## Interests & Experiences

## Statement of Interest/Why You Should Be Appointed

I have an adult child who lives with me who suffers from schizophrenia for the last two years. Due to supporting him I have become very aware of the need for better integration of mental health with Alexandria City services. I have participated in the statewide NAMI lobbying day in Richmond Virginia in spring 2023, and just recently attended the U.S. Congress lobbying day for the Schizophrenia and Psychosis Action Group of Alexandria. I have completed the Alexandria Policy Academy in fall 2022. Prior to moving to Virginia, I was very active in special education and autism advocacy in Little Rock, Arkansas. I have a background in Medicaid and budgeting from working in the Governor's Office as Budget Director and in the Nursing Home Association of Arkansas. I have a strong background in the developmental disabilities and child services, not just adult mental health.

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Are you currently a member of a City Board, Commission, Committee or Authority?
○ Yes ⊙ No
If yes, please list the board:
How many terms have you served on this board?
none
If you have served more than two consecutive terms on this board, please state the specific qualifications you possess which merit consideration for continued service:
Have you applied for a position on a City Board, Commission, Committee or Authority in the last six months?
○ Yes ⊙ No
If yes, please state the names of the boards for which you have applied
Are you now paid by the City of Alexandria?
○ Yes ⊙ No
If yes, please state your department, job title, and describe your duties:
Do any of your immediate relatives or business associates now serve the City of Alexandria in any capacity?
© Yes ⊙ No
If yes, please explain:

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 ○ No
If applicable, will you comply with the provisions of the City's conflict of interest requirements in City Ordinance 2867?
© Yes ○ No
EDUCATIONAL BACKGROUND (Please list certificates, diplomas, degrees, seminars, etc.):
MBA, University of Michigan, 1996 AB, Harvard University, 1992 In the past, I was a Certified Internal Auditor, Certified Government Financial Manager, and Certified Fraud Analyst.
SUMMARY OF WORK AND PRACTICAL EXPERIENCE (Please list titles and duties for the past five years):
Not currently working. Active in local NAMI and mental health efforts in NOVA. I attend family-to-family NAMI meetings and also have participated in Richmond and D.C. outreach to legislators on mental health regulation and legislation.
REFERENCES (Please list names and addresses of four references that you have contacted and support your application).

## **Non-Discrimination Data Supplemental Questions**

By submitting this application electronically, I hereby certify that all information contained herein is true and complete and that the transaction will be subject to the Virginia Uniform Electronic Transactions Act..

Upload a Resume

#### SUBMISSION OF THIS PAGE IS VOLUNTARY

#### Confidential - NOT FOR PUBLIC INFORMATION

Non-Discrimination Data Supplemental Questions For Applications to City Boards, Commissions, and Committees

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. One responsibility of the Human Rights Commission (HRC) is to track whether the diversity in our City's population is reflected in appointments made to boards, commissions, committees and authorities; the HRC does this using only data supplied on this form. The HRC reports statistics only to Council.

The HRC's main role is to ensure discrimination does not occur in our city based on race, color, sex, religion, ancestry, national origin, marital status, familial status, age, sexual orientation or disability with respect to housing, employment, public accommodations, health and social services, education, credit or city contracts.

Date of Application
Ethnicity
Gender
Sexual Orientation
For what Board, Commission, Committee, or Authority are you applying?
Do you live in the City of Alexandria?

Do you have Disability?
If yes, briefly describe the disability?
How did you learn of the vacancy for which your applying?

#### **Personal Data Record Form**

#### **Profile**

## FOR PUBLIC INFORMATION

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Submit Date: Oct 13, 2023

APPLICANTS MAY ONLY APPLY FOR ONE VACANCY AT A TIME. DUPLICATE/MULTIPLE APPLICATIONS WILL NOT BE CONSIDERED.

# **New Applicant or Current Member** Andrew Stankevich First Name Last Name **Email Address** Primary Phone Alternate Phone **Date of Birth Home Address** Street Address Suite or Apt 22032 Postal Code City State Employer Job Title Applicants may only apply for **ONE** board/commission/committee at a time. Please note: If more than one board is selected, your applications will not move forward for City Council consideration. Which Boards would you like to apply for? Community Services Board: Submitted Which position are you applying for?

Community Service Board

Demographics
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 ⊙ No
If yes, how long?
NA, but I live in Fairfax
Have you ever attended a meeting of the Board or Commission for which you are applying?
○ Yes ⊙ No
Have you ever served the City of Alexandria in any capacity?
⊙ Yes ○ No
If yes, please explain
I have presented to the Alexandria Community Services Board's Wellness Center on meditation and mindfulness practices through Harold Harris, PRS and City of Alexandria CSB employee, Office: 703.746-3490 Cell: 703. 864-5883
Are you a consumer (former direct recipient of public or private mental health, developmental disability, or substance abuse treatment or rehabilitation) or immediate family member of a consumer or a principal care giver who is not paid?
⊙ Yes ♂ No
Question applies to Community Services Board  Are you an employee or board member of an organization which receives funding from any  Community Services Board?
○ Yes ⓒ No
Interests & Experiences
Statement of Interest
I am Peer Recovery Specialist, law school graduate, and legally disabled mental health consumer.
Are you currently a member of a City Board, Commission, Committee or Authority?
C Yes ⊙ No
If yes, please list the board:

How many terms have you served on this board?
If you have served more than two consecutive terms on this board, please state the specific qualifications you possess which merit consideration for continued service:
Are you now paid by the City of Alexandria?
If yes, please state your department, job title, and describe your duties:
Do any of your immediate relatives or business associates now serve the City of Alexandria in any capacity?
○ Yes ⊙ No
If yes, please explain:
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⊙ Yes ○ No
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 ○ No
EDUCATIONAL BACKGROUND
Juris Doctor, Bachelors of Arts in Human Services
SUMMARY OF WORK AND PRACTICAL EXPERIENCE:
See resume and picture of me as "Year of the Peer" awardee.
REFERENCES - Please list names, phone number and/or email addresses of three references that support your application.

Upload a Resume



Additional Document (statement of interest, letter of support, or recommendation, etc..)

## **Non-Discrimination Data Supplemental Questions**

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## **Date of Application**

Ethnicity		
None Selected		
Gender		
None Selected		
Sexual Orientation		
None Selected		

Andrew Stankevich

For what Board, Commission, Committee, or Authority are you applying?
Do you live in the City of Alexandria?
Do you have Disability?
If yes, briefly describe the disability?
How did you learn of the vacancy for which your applying?