# Commission on Persons With Disabilities

City of Alexandria, VA | Generated 3/3/2025 @ 7:14:48 PM by OnBoardGOV - Powered by ClerkBase

Applicant	Date	Address	Contact	Status
Babette Cooper	2/22/2025	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
Shannon Loelius	2/3/2025	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
Mr Robert Ludke	2/3/2025	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
Donna Marie Turnage Spencer	2/14/2025	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

# **Babette Cooper**

City of Alexandria, VA | Generated 3/3/2025 @ 2:14 pm by OnBoardGOV - Powered by ClerkBase

Status

Name
Babette Cooper
Commission on Persons With Journal Contested
Disabilities

Expiration Date
9/22/2025

Board
Contested
Disabilities

Vacancies
Status
Actions

Actions

Status Validated

**Babette Cooper** 

**Basic Information** 

Dalasta Casas

Name

**Board Member** 

Babette Cooper

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
Phone
REDACTED

**Alternate Phone** 

REDACTED

Occupation

Employer (student and youth applicants list school)
Securities and Exchange
Commission

**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?

20+ years

# Statement of Interest

I'm interested in serving on the Commission on Persons with Disabilities. I am concerned about this population. My mom worked in special education during her career and I got to witness first hand how important advocacy is for this population. I believe now especially with all of the Federal anti-DEI initiatives, this committee is very important and I'd like to take part in helping the disability community.

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

#### **Summary of Work and Experience**

20+ years working for SEC as Staff Accountant Prior to the SEC, I worked in private and public companies as an accountant.

 $\textbf{References - Please list names, phone number and/or email addresses of three references that support your application.} \\ \textbf{REDACTED}$ 

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.

How did you hear of this vacancy?

REDACTED

REDACTED

# Shannon Loelius

City of Alexandria, VA | Generated 3/3/2025 @ 2:14 pm by OnBoardGOV - Powered by ClerkBase

Status

Name
Shannon Loelius
Application Date
2/3/2025

Board
Commission on Persons With Disabilities

Commission on Persons With Disabilities

Commission on Persons With Disabilities

**Board Member** Shannon Loelius

Status Validated

### **Basic Information**

Name
Shannon Loelius
Date of Birth

#### 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.)

Email REDACTED Phone

REDACTED

Yes

# Occupation

Employer (student and youth applicants list school) Health and Human Services

**Job Title** REDACTED

# **New Applicant or Current Member**

**New Applicant** 

REDACTED

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?

5 years

#### Statement of Interest

I would like to ensure the city provides sufficient service to persons with disabilities. While I do not have a physical disability, I have seen in my family how resources can allow a person to be independent, and a lack of resources can impact their independence. I want to ensure people in Alexandria have appropriate services, that the city is designed to work for all of our residents. In my work, I have seen the importance of considering all residents and citizens in emergency response scenarios. However, many times persons with disabilities are considered after the majority of work is completed and referred to in addendums. I believe this work should start at the foundation of every community rather than an addendum.

#### 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?

INO

#### 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?

Yes

#### Please explain relation and capacity:

My husband is a member of ARHA.

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**

I have a B.S. in Biotechnology and a PhD in Immunology

#### **Summary of Work and Experience**

I have worked the last 5 years at Health and Human Services in the Biomedical Advanced Research and Development Authority as a Biologist. My job duties include Program management for contracts developing medical countermeasures for chemical, biological, radiological, and nuclear threats.

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

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REDACTED

#### Gender

REDACTED

#### **Sexual Orientation**

REDACTED

#### **Ethnicity**

REDACTED

#### Do you have a disability?

REDACTED

# Mr Robert Ludke

City of Alexandria, VA | Generated 3/3/2025 @ 2:14 pm by OnBoardGOV - Powered by ClerkBase

Status

Name Mr Robert Ludke Commission on Persons With Disabilities

2/3/2025

Expiration Date 9/3/2025

Board Vacancies Status Actions

Commission on Persons With Disabilities

Status Validated

**Robert Ludke** 

**Basic Information** 

Mr Robert Ludke

**Board Member** 

Date of Birth

Name

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
Phone

REDACTED

Occupation

Employer (student and youth applicants list school)
Ludke Consulting, LLC

**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.)

**Board Member** 

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?

Since 2005

Statement of Interest

I am interested in continuing my service on ACPD.

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?

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?

Nο

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** 

MA Degree

**Summary of Work and Experience** 

See resume

 $\textbf{References - Please list names, phone number and/or email addresses of three references that support your application.} \\ \textbf{REDACTED}$ 

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REDACTED

How did you hear of this vacancy?

REDACTED

# Donna Marie Turnage Spencer

City of Alexandria, VA | Generated 3/3/2025 @ 2:14 pm by OnBoardGOV - Powered by ClerkBase

Status

Name
Donna Marie Turnage Spencer
Application Date

Board
Vacancies Status Actions

Commission on Persons With Disabilities

**Expiration Date** 2/14/2025 **Expiration Date** 9/14/2025

**Board Member Donna Marie Turnage Spencer** 

Status Validated

## **Basic Information**

Name Donna Marie Turnage Spencer

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

Phone

REDACTED

# Occupation

Employer (student and youth applicants list school)

Contractor

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?

All of my life (with the following exceptions: born & lived (1964-66) in Washington DC; and 1982-2011 in college, graduate school, etc)

#### Statement of Interest

I am interested in becoming a member of this Commission because I am a person with multiple disabilities hoping to help us disabled residents in whatever way I am able.

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

Yes (Please explain), At this moment, I am recalling I was employed in the summer youth employment program, decades ago.

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?

Yes

#### Please explain relation and capacity:

A relative works at the Visitor Center (if that counts).

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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**

Bachelor's of Science in Psychology/James Madison University Graduate studies, no degree/University of Virginia

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

#### REDACTED

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REDACTED

#### Gender

REDACTED

#### **Sexual Orientation**

REDACTED

#### **Ethnicity**

REDACTED

### Do you have a disability?

REDACTED

## How did you hear of this vacancy?

REDACTED