
Name of Council Member

Endorsement

CONTESTED APPOINTMENTS

Commission on Aging
(3-year term)

1 citizen member 60 years or older

_____ Dawn Higgins

_____ Geraldine Wallace

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.** 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.

New Applicant or Current Member☒ New Applicant

Dawn

First Name

Higgins

Last Name

Email Address

Date of Birth**Place of Birth****Home Address**

Street Address

Suite or Apt

City

State

22314

Postal Code

Primary Phone

Alternate Phone

SIMUCASE

Employer

Lead Simulation and Learning
Developer Social Work

Job Title

Applicants may only apply for **ONE** board/commission/committee at a time.

Which Boards would you like to apply for?

Commission On Aging: Submitted

Dawn Higgins

Type of Position/Role

Citizen Member

Demographics

Do you currently live in the City of Alexandria?

☒ Yes ☐ No

If yes, how long?

Since 1993

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

Interests & Experiences

Statement of Interest/Why You Should Be Appointed

I moved to Old Town Alexandria in 1993 and lived here for 11 years. I pursued an academic position and left Virginia for several years, before returning in 2015. As a licensed clinical social worker I understand the importance of supporting the aging community. I believe I have the professional and personal experiences that would allow me to contribute to this commission.

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?

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:

Dawn Higgins

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

Upload a Resume

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.):

PhD Social Work LCSW Virginia

SUMMARY OF WORK AND PRACTICAL EXPERIENCE (Please list titles and duties for the past five years):

LCSW private practice Associate Professor of Social Work

Dawn Higgins

REFERENCES (Please list names and addresses of four references that you have contacted and support your application).

[REDACTED]

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..

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

[REDACTED]

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New Applicant or Current Member☒ New Applicant

Geraldine

First Name

Wallace

Last Name

Email Address

Date of Birth**Place of Birth****Home Address**

Street Address

City

Primary Phone

Suite or Apt

State

22304

Postal Code

Alternate Phone

self

Employer

Project/Program Manager

Job Title

Applicants may only apply for ONE board/commission/committee at a time.

Which Boards would you like to apply for?

Commission On Aging: Submitted

Geraldine Wallace

Type of Position/Role

Demographics

Do you currently live in the City of Alexandria?

☒ Yes ☐ No

If yes, how long?

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

Election Officer

Interests & Experiences

Statement of Interest/Why You Should Be Appointed

My eagerness to participate on the Commission of Aging board is two-fold. The first is to learn more about the programs the City of Alexandria offers to low-income residents. The second is to become an advocate to share the information and increase and/or encourage participation for residents in need. Furthermore, I meet the requirement to be citizen of Alexandria and am 60+ years of age. As a youthful senior, I have "chosen to make the rest of my life the best of my life," as emphatically stated by Dr. Wayne W. Dyer. Through my 35+ years of working for the Federal government, I have learned that life's value has more meaning when one fulfills personal desires and serves in a capacity to give to others. Possessing a burning desire to help others in need is the way towards my self-actualization. Living an altruistic life is something I had understood well before I practiced the word's true meaning. My mission statement is "to guide and inspire people to explore and seek understanding AND to play and enjoy life to its fullest." My educational achievements in psychology and counseling will serve me well in volunteering for this position to observe, learn, add value, share information, and provide a service desperately needed to enhance one's lifestyle. It would be my absolute pleasure to be considered to serve!

Are you currently a member of a City Board, Commission, Committee or Authority?

☐ Yes ☒ No

If yes, please list the board:

Geraldine Wallace

How many terms have you served on this board?

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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?

☐ Yes ☐ No

EDUCATIONAL BACKGROUND (Please list certificates, diplomas, degrees, seminars, etc.):

Master of Science-Counseling and Bachelor of Science-Psychology Certification in Project Management and Scrum Master

Geraldine Wallace

SUMMARY OF WORK AND PRACTICAL EXPERIENCE (Please list titles and duties for the past five years):

Program Manager in the Information Technology functional area. Served as the facilitator to develop, plan, coordinate, synchronize, and provide oversight procedures, programs, and initiatives to develop policies for end-users in Privacy, Information Security, Change Management and Records Management.

REFERENCES (Please list names and addresses of four references that you have contacted and support your application).

[Redacted]

Non-Discrimination Data Supplemental Questions

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