N = New Application R = Reappointment

Board – Application Received	Applicants Under Consideration by	Mayor's Appointments for Confirmation
	Mayor	by the Assembly
Agriculture Advisory Board 12 members - 2 vacancies	•	
Member 01 Palmer Soil/Water		
Member 12 Non-Voting Youth Intern		
Animal Care and Regulation Board		
5 members/1 alt – 2 vacancies		
Animal Trainer		- U 0 00 1 -
Licensed Vet		Julie Stafford - N
Board of Adjustment and Appeals		
5 members/3 alt – 2 vacancies		
Alternate 2		
Alternate 3		
Board of Equalization		
15 members – 8 vacancies - (3) 3 year terms		
Member 1		
Member 3		
Member 6		
Member 7		
Member 9		
Member 10		
Member 13		
Member 14		
Borough Area Schools Site Selection Committee		
7 members/3 alt		
Assembly Alternate		
Commission on Salaries & Emoluments		
5 members – 1 vacancy		
Member 4 Labor Organization		
Enhanced 911 Advisory Board		
5 members/5 alt - 2 vacancies		
AK State Trooper Alternate		
City of Houston Alternate		
Health & Social Services Board 7 members/1 alt		
1 vacancy		
Member 8 Alternate		Linda Hendrickson - N

Vacancy Report

N = New Application R = Reappointment

Board – Application Received	Applicants Under Consideration by	Mayor's Appointments for Confirmation
	Mayor	by the Assembly
Historical Preservation Commission		
9 members – 3 vacancies		
Member 3		
Member 5		
Member 7		
Labor Relations Board 5 members -3 vacancies		
Member 2		
Member 3		
Member 4		
Local Emergency Planning Committee		
33 members – 7 vacancies		
Borough Government		
City of Houston (non-law enforcement)		
City of Palmer (non-law enforcement)		
Elected Official		
Law Enforcement AK State Troopers		
Law Enforcement Houston Police		
Trucking or Transportation	•••••	Kevin Gunnip - N
Office of Administrative Hearings 5 members – 4 vacancies		
Seat B		
Seat C		
Seat D		
Seat E		
Road Service Area Task Force 2022 5 members/2 alt		
Member 1		
Member 2		
Member 3 Member 4		
Member 5		
Member 6 Alternate		
Member 7 Alternate		
,		
,		

Vacancy Report

N = New Application R = Reappointment

Roard - Applic	eation Received	Applicants Under	Mayor's Appointments for Confirmation
Board - Applic	ation received	Consideration by	by the Assembly
		Mayor	by the Assembly
Wastewater & Septage Adv			
	7 members – 2 vacancies		
City of Palmer	_		
Environmental Engineer Backs			
Sutton FSA # 4	3 members – 3 vacancies		
Member 1			
Member 2			
Member 3	_		
Alpine RSA # 31	3 members –2 vacancies		
Member 2			
Member 3			
Knik RSA # 17	3 members – 1 vacancy		
Member 3			
Lazy Mountain RSA # 19	3 members – 1 vacancy		
Member 1			
North Colony RSA # 23	3 members – 1 vacancy		
Member 2			
Trapper Creek RSA # 30	3 members – 2 vacancies		
Member 1			
Member 2			
Chase Trail Service Area #	•		
24.	3 members – 3 vacancies		
Member 1			
Member 2			
Member 3	D. I. D. I. O. YAY		
Circle View & Stampede			
Erosion # 131 Member 1	5 members – 5 vacancies		
Member 1 Member 2			
Control of the Contro			
Member 3 Member 4			
Member 5			

N = New Application R = Reappointment

Board – Application Received	Applicants Under Consideration by Mayor	Mayor's Appointments for Confirmation by the Assembly
Talkeetna Flood Control Service Area # 7		
3 members – 3 vacancies		
Member 1		
Member 2		
Member 3		
Talkeetna Sewer & Water Service Area #36		
5 members – 2 vacancies		
Member 3 SSA		
Member 4 CC		

# MATANUSKA-SUSITNA BOROUGH - CLERK'S OFFICE

350 E. Dahlia Avenue Palmer, AK 99645

Phone: 861-8683 Fax: 861-7845

MAR 0 4 2022

CLERKS OFFICE

# BOARD, COMMISSION, AND COMMITTEE APPLICATION FORM

## INSTRUCTIONS

Complete and sign the application. Do not leave any blank fields. Type or print legibly in ink. Specify exactly what board and position you are seeking. Completed applications may be emailed to debra.wetherhorn@matsugov.us or delivered or mailed to the Borough Clerk's Office, 350 E. Dahlia Avenue, Palmer, or faxed to 861-7845. If you have questions, please call 861-8683.

Board and position	for which I am applying:	Animal Care and Regulation Bo	
	Julia Stafford DVM	(For example, Board of	Equalization, Member 3)
Applicant Name:	Julie Stafford DVM		
Residence Address:	39600 S Mockorange Cir	r. Wasilla, AK 99623	
Mailing Address:	PO box 877475 Wasilla,	AK 99687	
Home/Cell phone: _	541-602-5055 Work	phone: 907-521-4292 Emai	l: 2TailsVet@gmail.com
		erinary Services LLC PO Box 8774	
Can you regularly at absent from three (3) con	ttend meetings? Yes N	O (Pursuant to (MSB 4.05.030, "A vac without the board excusing the absence for	cancy occurs on the board when the member is good cause."
Do you or any famil	y member have a personal	or financial interest with the Boroug	gh? Yes 🗌 No 🔀
If yes, list positions	and or interest:	ergency responder, RSA or FSA area si	pervisor, board member, contractor etc.)
How long have you	lived in the Borough? Sir	nce 8/2018	
Briefly explain, why	you are you interested in s	erving on the board in which you a	re applying?
As a veterinarian, I a protection and prom	am interested in providing otion of animal health and	an educated, experienced persperienced wellness along with that of the persperienced p	ective to the borough regarding the eople who care for and live among then
			oard? You may attach a brief resume iding veterinary care to animals residing
in the borough for 6	years, providing on site (	home or farm) medical and wellne	ess care as a mobile veterinarian
	-Su borough for 4 years. Il or personal references:	Name: Mika Straub	Phone: 907-590-8095
		Name: Lindsey Owen	Phone: 907-414-9409
		Name: Paula DeLaiarro	Phone: 907-441-1935
Applicant Signature:	PLEASE CONTINUE	LEAST IGN APPLICATION	Date: 03/04/2022 ETE PAGE 2
Office Use Only: Pred	cinct: 08-145	Assembly District: 5	Service Area: NA
Position on Board:	ACRB Ucens	1 . 1 . 1	Term Ends: 12/31/2022
Residence Checked: I	Yes Man C	hecked: Pyes Code Che	cked: 1st / 2nd

Revised 2.21.19 Page **1** of **2** 

Applicant Name: Julie Stafford DVM
<ol> <li>Do you have any civil judgment against you within the last 10 years, whether monetary, non-monetary, declarative, injunctive, or any other form or manner?X_NOYES</li> </ol>
If yes, please provide on a separate page the following: (1) case name, (2) nature of action, (3) year of judgment, and (4) a brief description of the judgment entered and/or sentence imposed.
<ol> <li>Do you have any judgments against you in a criminal case within the last 10 years, whether upon finding of guilt, plea of no contest, suspended, or any form of judgment other than dismissal or not guilty?         X NO YES     </li> </ol>
If yes, please provide on a separate page the following: (1) case name, (2) nature of action, (3) year of judgment, and (4) a brief description of the judgment entered and/or sentence imposed.

Revised 2.21.19 Page **2** of **2** 

MATANUSKA-SUSITNA BOROUGH - CLERK'S OFFICE

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# MAR 0 3 2022

# BOARD, COMMISSION, AND COMMITTEE APPLICATION FORM

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Board and position for which I am applying: Health and Social Servicts  (For example, Board of Equalization, Member 3)
Applicant Name: LINDA HENDRICKSON
Residence Address: 699 W Charlottee Circle Wasilla 99654
Mailing Address:
Home/Cell phone: 907-841-0623 Work phone: Email: Ishendrickson512gmail. com
Name and Address of Employer: retired / business owner
Can you regularly attend meetings? Yes No (Pursuant to (MSB 4.05.030, "A vacancy occurs on the board when the member is absent from three (3) consecutive regular board meetings without the board excusing the absence for good cause."
Do you or any family member have a personal or financial interest with the Borough? Yes \(\subseteq\) No \(\subseteq\)
If yes, list positions and or interest: Board Chain, Set Free Alaska (For example: employee, emergency responder, RSA or FSA area supervisor, board member, contractor etc.)
How long have you lived in the Borough? 19 years
Briefly explain, why you are you interested in serving on the board in which you are applying? <u>Thaue 40</u>
TWOULD LIKE TO WUE BACK TO MY & OMMUNITY.
List professional or personal experiences that qualify you for membership on the board? You may attach a brief resume to highlight your qualifications: Chair of the board of SetFree Alaska
See resume
List three professional or personal references:  Name: CathyTilton  Phone: 907-232-24097  Name: Karen Brackon  Phone: 907-841-2918
Name: Mar Van Buskirk Phone: 907 - 355 - 1464
Applicant Signature: Jiman Hundrubson Date: March 1, 2022  PLEASE SIGN APPLICATION  PLEASE CONTINUE TO THE OTHER SIDE TO COMPLETE PAGE 2
Office Use Only: Precinct: 10-010 Assembly District: Service Area: NA
Position on Board: HEE Member 8 PHEPINE Term Ends: 18/31/3033
Residence Checked: Ves Code Checked: 1st 2nd 2nd

Revised 2.21.19

Page 1 of 2

3/semailes

App	licant Name:
1.	Do you have any civil judgment against you within the last 10 years, whether monetary, non-monetary, declarative, injunctive, or any other form or manner?X_NOYES
jud	es, please provide on a separate page the following: (1) case name, (2) nature of action, (3) year of gment, and (4) a brief description of the judgment entered and/or sentence imposed.
2.	Do you have any judgments against you in a criminal case within the last 10 years, whether upon finding of guilt, plea of no contest, suspended, or any form of judgment other than dismissal or not guilty? X_NOYES
	res, please provide on a separate page the following: (1) case name, (2) nature of action, (3) year of gment, and (4) a brief description of the judgment entered and/or sentence imposed.

3950 Wickersham Way Home: (907) 357-8342

Wasilla, Alaska 99654 Cell: (907) 841-0623

Lshendrickson51@gmail.com

# Linda Hendrickson

## Experience

#### 2003 - 2019 Executive Director of Chugiak Senior Center, Chugiak, Alaska

- Day to day oversight of entire facility including 55 staff.
- Oversight of the creation and monitor 2.5 million dollar budget.
- Streamlined staffing.
- Responsible for oversight and monitoring success of over 10 programs.
- Secure funding through grants related sources.
- Ensure center is in compliance with State and Federal and Municipal entities.
- Hire and retain qualified staff.

## 2002-2003 Compliance Director, Chugiak Senior Center, Alaska

2002 - 2002 Hope Community Resources, Anchorage, Alaska

# Care Coordinator / Case Manager

- Oversight of 18 clients and their service plans including two face-to-face visits per month.
- Composing goals, objectives, and methodology and recording outcomes for client's plan of care.
- Expediting access to appropriate agencies for clients' needs.
- Crisis intervention.
- · Maintain state, federal and agency regulation.
- · Advocacy for clients in fair-hearing sessions.
- Participated in "team approach" goals.
- Worked with doctors, nurses and other health professionals to search for best possible approach to health concerns of assisted living clients.

#### 1997 - 2002 CRISTA Senior Community, Shoreline, Washington

#### Director of Resident Services

- Restructured staffing responsibilities to lower overtime by 50% in the first year.
- Established on premises a 'central supply' to ensure cost effective operation for CRISTA and lower cost for resident.
- Revised resident service fee system from point-to-fee for service menu resulting in a more cost effective and fair billing procedure.
- Created and implemented in-house training curriculum for front line staff according to state regulations.
- Hired, trained and evaluated 31 frontline staff.
- Conducted all assessments for potential residents of 90-bed facility.
- Continuously reviewing and revising policies and procedures to meet new and changing state and federal regulations.
- Responsible for all documentation and oversight of compliance with state and federal regulation.

## 1986-1997 CRISTA Senior Community, Shoreline, WA

#### CRISTWOOD Beauty Shop Manager

- Worked closely with administrator to set up ancillary departments of the new facility such as beauty salon including, administrative policy, hiring new personnel
- Instrumental in creating systems to ensure policies, procedures and communications were universal for each department.
- Increased revenue in one service department by 50% in first year of operation.

# 1981-1986 Teen Challenge, Seattle, Washington

#### Treatment Counselor Intern

- Monitored and documented progress of 16 residents.
- Worked on in-take committee for two years, assessing potential clients for admission to the program.

Education

2002 Assiste

Assisted Living Administrator, Anchorage, Alaska

2000 Miami, Florida AASHA, Miami, Florida

#### Certificates

- CASP Retirement Housing Professional
- Care Coordinator / Case Manager
- Psychotropic Pharmaceuticals / Geriatrics
- Dementia / Alzheimer's
- Certified Nursing Assistant
- Nurse Delegation
- Fundamentals of Care
- Medical Terminology
- Medication Assist in the Boarding Home / Assisted Living
- Regulation Compliance in Assisted Living / Boarding Home
- Documentation is the Key to Compliance
- WACs and REGs Boarding Home / Assisted Living
- The Eden Alternative / Alzheimer's / Dementia
- Gentle Care / Alzheimer's / Dementia
- The Law and Human Resources

## 1999 North Texas University, Dallas, Texas

• CASP Retirement Housing Professional Certificate

# 1997 Shoreline Nursing Institute, Shoreline, Washington

Certified Nursing Assistant

# MATANUSKA-SUSITNA BOROUGH - CLERK'S OFFICE

350 E. Dahlia Avenue Palmer, AK 99645

Phone: 861-8683 Fax: 861-7845

DATE R	CRIVED: RECEIVED
	MAR 0 4 2022
	CLERKS OFFICE

# BOARD, COMMISSION, AND COMMITTEE APPLICATION FORM

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Board and position for which I am applying: LEPC - Transportation a Tricking board member
(For example, Board of Equalization, Member 3)
Applicant Name: Keun Gunip
Residence Address: 16141 Rosenburg Circle, Engle River, AK 99577
Mailing Address: 59Me
Home/Cell phone: 907 6321427 Work phone: Email: Kgunip@lynden.com
Name and Address of Employer: Lynden, 6441 S. Airpark Place, Anchorage AK 99502
Can you regularly attend meetings? Yes No (Pursuant to (MSB 4.05.030, "A vacancy occurs on the board when the member is absent from three (3) consecutive regular board meetings without the board excusing the absence for good cause."
Do you or any family member have a personal or financial interest with the Borough? Yes No
If yes, list positions and or interest:  (For example: employee, emergency responder, RSA or FSA area supervisor, board member, contractor etc.)
How long have you lived in the Borough? ON/OFF 1996
For operations during energency situations when required
List professional or personal experiences that qualify you for membership on the board? You may attach a brief resume to highlight your qualifications: 25 years military sperational planning & years, Lynden, Moving Creight throughout Alaska up Art, land or Sea
List three professional or personal references: Name: Eda Deuries Phone: 907 795 8133
Name: A, 115 VAAA Phone: 907 745 2880
Name: Jerony Ring Phone: 907 376 0550
Applicant Signature: Date: 3.3.2022  PLEASE SIGN APPLICATION  PLEASE CONTINUE TO THE OTHER SIDE TO COMPLETE PAGE 2
I BEAGE CONTENDED TO COME BEILE I AGE 2
Office Use Only: Precinct: Kesiden () Assembly District: Walved Service Area:
Position on Board: LECTRUCKING/Transportation Term Ends: 12/3/124
Residence Checked: Tyes Man Checked: New Code Checked: 1st 2 2nd 7

Applicant Name: Kesin Gunip
1. Do you have any civil judgment against you within the last 10 years, whether monetary, non-monetary, declarative, injunctive, or any other form or manner?YES
If yes, please provide on a separate page the following: (1) case name, (2) nature of action, (3) year of judgment, and (4) a brief description of the judgment entered and/or sentence imposed.
2. Do you have any judgments against you in a criminal case within the last 10 years, whether upon finding of guilt, plea of no contest, suspended, or any form of judgment other than dismissal or not guilty? NOYES
If yes, please provide on a separate page the following: (1) case name, (2) nature of action, (3) year of judgment, and (4) a brief description of the judgment entered and/or sentence imposed.