MEETING DATE 6/12/06

AGENDA ITEM Consideration of appointments and/or reappointments to the Culver City Disability Advisory Committee

ATTACHMENTS

		Pages
1	List of all applicants	1
2	Copies of all applications	2-15

ATTACHMENT 1

DISABILITY ADVISORY COMMITTEE

List of Applicants

Name	City
* Chris Brown	Culver City
** Jay J Shery	Los Angeles
Robyn Tenensap	Culver City

* Currently appointed to Office No 1
** Currently appointed to Office No 5

ATTACHMENT 2

CITY OF CULVER CITY

9770 CULVER BOULEVARD P O BOX 507 CULVER CITY CA 90232 0507

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CITY OF CULVER CITY

APPLICATION AND BIOGRAPHICAL DATA FOR COMMISSION, BOARD OR ADVISORY COMMITTEE MEMBERSHIP

(please type or print)

The information contained on this form is for the use of the City Council in order to fill vacancies on City Commissions Boards Advisory Committees or Task Forces **However all information on this form will become a public record and be available for public inspection or duplication as authorized by law**

Separate applications *must* be submitted for each body to which application is being made

General Information

1 Identify the Commission Advisory Committee or Task Force to which appointment is desired
Culver City disability advisory Committee

2 If applying for a position on the Landlord/Tenant Mediation Board indicate whether you are applying as a tenant representative (N/A) landlord representative (____) or member at large representative (___)

Call the Housing Division at (310) 253 5780 if you have any questions regarding eligibility for Landlord/Tenant Mediation Board positions

3 Name Chris Brown Telephone [redacted]

Address [redacted] Zip 90232

~~Business~~ Culver City CA. Telephone ( )

Address Zip

E mail address

Answer the following (Use additional sheets if necessary)

4 **Community Service**

(List boards commissions, committees and organizations on which you have served or currently serve, offices held and in what city)

1) Culver City disability advisory committee - 4yrs

might reflect adversely on the propriety of your serving as a member of any body to which you might be appointed?

15 How many meetings of the Commission Board or Committee to which you are interested in being appointed have you attended in the last year? 12-15

16 How much time on a monthly basis do you anticipate spending on preparation for and attendance at meetings of the body to which you desire appointment?

1 hour

17 Why are you interested in appointment to a City Commission Board Committee or Task Force?

I am a person with a life long disability. I have been involved with this Committee for four years and would like to continue. I enjoy getting a first hand look @ City government and issue that need to be corrected.

18 What is there specifically in your background training education or interests which qualifies you as an appointee? I use an electric wheelchair and I deal with my disability and ability everyday. Have been envolved with the designated disabilities month in Culver City.

19 What do you see as the objectives and goals of the body to which you seek appointment?

Continue to make the City of Culver City accessible to the disabled ~~continue~~ Ex street light bathrooms, curb cuts). As well as voting accessibility

20 How would you recommend the objectives and goals of the body be changed or augmented?

I currently do not feel the objectives of the committee need to be changed.

21 How would you help achieve the body's established objectives and goals? Hands on, show up @ the site of the problem.

22 What special qualities can you bring to the body to which you seek appointment?

Knowledge about wheelchairs & users
I have resided in Culver City for
twenty-two years. I have seen a lot of changes

REMINDER **All information on this application will become a public record and be available for public inspection or duplication as authorized by law**

I hereby certify that the foregoing information is correct to the best of my knowledge

Signature Christopher C. Gregory Date 5.25.06

You are invited to attach additional pages enclose a copy of your resume or submit supplemental information which you feel may assist the City Council in its evaluation of your application

Submit application(s) and attachments to

City of Culver City
Attention City Clerk
9770 Culver Boulevard
Culver City CA 90232-0507

(310) 253-5851

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OPTIONAL

In order to assist the City Council in seeking to balance appointments in terms of geographic location of residence and/or business ethnicity gender and age the following information is desirable but not required for application submission or appointment

If a City resident for how long? 22 YEARS If a City business owner/operator for how long?_____

Year of Birth 1954 Male X Female____ Ethnicity White

5/98 jhc

5 **Employment**
(Title and duties current and past)

N/A

6 **Education**
(Include professional or vocational licenses and certificates)

AA - Long Beach City College (1975)
BA - CalState Long Beach (1982)

Personal

7 Are you a U S citizen? YES X NO____

8 Are you registered to vote in Culver City? YES X NO____

9 Have you ever been convicted fined imprisoned or placed on probation for a felony or for a misdemeanor involving fraud? YES____ NO X

10 Have you ever worked for the City of Culver City? (If yes list dates and names of departments) YES____ NO X

11 Are you related to any current City employees or appointees of the City of Culver City? (If yes indicate name and relationship) YES____ NO X

12 Are you aware that financial disclosure may be required annually? (e g sources of income, loans and gifts investments interests in real property) YES X NO____

13 Rules or law and ethics prohibit members from participating in and voting on matters in which they may have a direct or indirect financial interest Are you aware of any potential conflicts of interest which may develop from your occupation or financial holdings in relation to your responsibilities as a member of the body to which you seek appointment? (If yes please indicate any potential conflicts) YES____ NO X

14 Have there been or are there now any business circumstances which YES____ NO X

CITY OF CULVER CITY

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CITY OF CULVER CITY

APPLICATION AND BIOGRAPHICAL DATA FOR COMMISSION, BOARD OR ADVISORY COMMITTEE MEMBERSHIP

(please type or print)

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General Information

1 Identify the Commission Advisory Committee or Task Force to which appointment is desired
Disability Advisory Committee

2 If applying for a position on the Landlord/Tenant Mediation Board, indicate whether you are applying as a tenant representative (_____) landlord representative (_____) or member at large representative (___)

Call the Housing Division at (310) 253 5780 if you have any questions regarding eligibility for Landlord/Tenant Mediation Board positions

3 Name Dr Jay J Shery Telephone ( ) [redacted]

Address [redacted] Zip 90066

Business [redacted] Telephone ( ) [redacted]

Address [redacted] Zip 90232

E-mail address [redacted]

Answer the following (Use additional sheets if necessary)

4 **Community Service**

(List boards commissions committees and organizations on which you have served or currently serve offices held and in what city) Disability Advisory Committee 7/01 5/06 Culver City
Chairman D A C 7/04 - 5/06
Representative to C D B G Committee 2003
Exchange Club of Culver City 1992 - present
President 2004-2005

Culver City Employees take pride in effectively providing the highest levels of service to enrich the quality of life for the community by building on our tradition of more than seventy five years of public service by our present commitment and by our dedication to meet the challenges of the future

PRINTED ON RECYCLED PAPER

5 **Employment**
(Title and duties, current and past)

Media DistrictChiropractic, Owner Clinic Director 1986 to present

Law Offices of Heisler & Bray, Attorney, 12/02 to present

6 **Education**
(Include professional or vocational licenses and certificates)

Loyola Law School J D May 1999
Los Angeles College of Chiropractic, D C 1986
Upsala College B S 1977

Personal

7 Are you a U S citizen? YES X NO

8 Are you registered to vote in Culver City? YES NO X

9 Have you ever been convicted fined imprisoned, or placed on probation for a felony or for a misdemeanor involving fraud? YES NO X

10 Have you ever worked for the City of Culver City? (If yes, list dates and names of departments) YES NO X

11 Are you related to any current City employees or appointees of the City of Culver City? (If yes indicate name and relationship) YES NO X

12 Are you aware that financial disclosure may be required annually? (e g sources of income, loans and gifts investments interests in real property) YES X NO

13 Rules or law and ethics prohibit members from participating in and voting on matters in which they may have a direct or indirect financial interest Are you aware of any potential conflicts of interest which may develop from your occupation or financial holdings in relation to your responsibilities as a member of the body to which you seek appointment? (If yes please indicate any potential conflicts) YES NO X

14 Have there been or are there now any business circumstances which YES NO X

might reflect adversely on the propriety of your serving as a member of any body to which you might be appointed?

15 How many meetings of the Commission Board or Committee to which you are interested in being appointed have you attended in the last year? 100%

16 How much time, on a monthly basis do you anticipate spending on preparation for and attendance at meetings of the body to which you desire appointment?

I anticipate spending an average of 5-10 hours per month on activities related to this committee

17 Why are you interested in appointment to a City Commission Board Committee or Task Force?

I have served on the Disability Advisory Committee since July 2001 and as chair of the committee for the past 2 years It has given me an opportunity to give back to this great community We have seen some wonderful changes in the past 5 years, and I look forward to serving for the next 4 years,

18 What is there specifically in your background training education or interests which qualifies you as an appointee?

In the past 25 years of my professional career, I have cared for patients with various disabilities I am trained and certified as a Qualified Medical Evaluator by the State of California I have always been an advocate for patient s rights and see this appointment as a way of furthering my ability to serve those with disabilities

19 What do you see as the objectives and goals of the body to which you seek appointment?

The Disability Advisory Committee helps identify and address the issues that impact the residents of this city who have disabilities Once the issues have been identified the goals of the committee are to discuss possible solutions and bring them to the attention of the City Council

20 How would you recommend the objectives and goals of the body be changed or augmented?

I would like to see more direct contact with the city engineers traffic division police department, and possibly the city attorney s office to address specific issues affecting those with disabilities

21 How would you help achieve the body s established objectives and goals?

I have been a very active and concerned member of this committee having attended every meeting and event for the past 5 years I helped establish the "Kids Carnival" for children with disabilities 4 years ago, and have been one of the major organizers of that event

22 What special qualities can you bring to the body to which you seek appointment?

I believe that my background and training in healthcare and law allow me a very unique perspective with regard to representing the interests of the disabled citizens of Culver City

REMINDER **All information on this application will become a public record and be available for public inspection or duplication as authorized by law**

I hereby certify that the foregoing information is correct to the best of my knowledge

Signature _____ Date 5-17-06

You are invited to attach additional pages, enclose a copy of your resume or submit supplemental information which you feel may assist the City Council in its evaluation of your application

Submit application(s) and attachments to

City of Culver City
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Culver City CA 90232-0507

(310) 253 5851

OPTIONAL

In order to assist the City Council in seeking to balance appointments in terms of geographic location of residence and/or business ethnicity gender and age the following information is desirable but not required for application submission or appointment

If a City resident for how long? _____ If a City business owner/operator for how long? _____

Year of Birth_____ Male_____ Female_____ Ethnicity_____

5/98 jhe

Dr Jay J Shery
[redacted]0066 Phone [redacted] Email [redacted]

Professional Experience

I have successfully merged my 20 years of medical and chiropractic education and practice with my legal training in the fields of health law and worker's compensation As a volunteer attorney at Bet Tzedek I specialized in cases dealing with Social Security Disability before the California Department of Health Services and Petitions for Conservatorship of disabled adults At Heisler & Bray, my practice consists of representation of employers in defense of Worker's Compensation cases With my background, I have become the firm's specialist in medical lien negotiations

Employment

HEISLER & BRAY, Woodland Hills, CA, Associate Attorney
December 2002 - Present

BET TZEDEK LEGAL SERVICES, Los Angeles, CA, Volunteer Attorney
August 2001 - December 2002

MEDIA DISTRICT CHIROPRACTIC, Culver City, CA, Clinic Director
June 1986- Present

LOS ANGELES COLLEGE OF CHIROPRACTIC, Whittier, CA, Clinical Instructor
January 1984- May 1986

BETH ISRAEL MEDICAL CENTER, New York, N Y , Resident Physician
1982-1984

Education

LOYOLA LAW SCHOOL, LOS ANGELES, CA
Juris Doctor, May 1999
Recipient of Bancroft-Whitney Am Jur Award in Marital Property

LOS ANGELES COLLEGE OF CHIROPRACTIC, WHITTER, CA
Doctor of Chiropractic, 1986, Summa Cum Laude

CETEC UNIVERSITY MEDICAL SCHOOL, DOMINICAN REPUBLIC
Doctor of Medicine, 1982

SCHOOL OF MEDICINE, UNIVERSITY OF ROME, ROME ITALY

UPSALA COLLEGE, EAST ORANGE, NEW JERSEY
Bachelor of Science in Biology, May 1977, Summa Cum Laude

LICENSES / CERTIFICATIONS

The State Bar of California, Bar # 213617 June 2001

Recipient of the Wiley W Manuel Award for Pro Bono Legal Services June 23, 2003

Qualified Medical Evaluator, State of California, Division of Worker's Compensation, 1991

Industrial Disability Examiner certification by the California Chiropractic Foundation, 1991

California Chiropractic License # 17818, Board of Chiropractic Examiners, 1986

National Board of Chiropractic Examiners, 1985

Educational Commission for Foreign Medical Graduates, 1982

Professional Associations

American Bar Association, Health Law Section, 1996- present

Los Angeles County Bar Association

Culver-Marina Bar Association

American Chiropractic Association, 1986- present

California Chiropractic Association, 1986- present
Board of Directors 1990-1996

Los Angeles County Chiropractic Society
Board of Directors 1988-1993
Doctor of the Year Award, 1991

San Fernando Valley Chiropractic Society
Director 1990-1996
President 1988-1990

Exchange Club of Culver City, 1992-present
President 2004-2005

Disability Advisory Committee, City of Culver City
Chairman 2004-2006

References Available upon request

5-31
6-13 Council

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(please type or print)

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General Information

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Culver City Disability Advisory Committee

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Call the Housing Division at (310) 253-5780 if you have any questions regarding eligibility for Landlord/Tenant Mediation Board positions

3 Name Robyn Tenensap Telephone [redacted]

Address [redacted] Zip 90230

Business [redacted] Telephone [redacted]

Address [redacted] Zip 90045

E-mail address [redacted]

Answer the following (Use additional sheets if necessary)

4 **Community Service**

(List boards commissions committees and organizations on which you have served or currently serve, offices held and in what city)

Culver City Disability Advisory Committee,
CERT

5 **Employment**
(Title and duties current and past)

Senior Vocational Rehabilitation Counselor 1984 – present
- develop rehabilitation programs for people with disabilities
- sensitivity training for employers & community
- worksite evaluation + modification for people w/ disabilities

6 **Education**
(Include professional or vocational licenses and certificates)

B.S. Counselor Education
M S Rehabilitation Counseling
Pupil Personnel Credential

Personal

7 Are you a U S citizen? yes — YES ✓ NO ____

8 Are you registered to vote in Culver City? yes — YES ✓ NO ____

9 Have you ever been convicted fined imprisoned, or placed on probation for a felony or for a misdemeanor involving fraud? — YES ____ NO ✓

10 Have you ever worked for the City of Culver City? (If yes, list dates and names of departments) — YES ____ NO ✓

11 Are you related to any current City employees or appointees of the City of Culver City? (If yes, indicate name and relationship) — YES ____ NO ✓

12 Are you aware that financial disclosure may be required annually? (e g sources of income, loans and gifts investments interests in real property) — YES ✓ NO ____

13 Rules of law and ethics prohibit members from participating in and voting on matters in which they may have a direct or indirect financial interest Are you aware of any potential conflicts of interest which may develop from your occupation or financial holdings in relation to your responsibilities as a member of the body to which you seek appointment? (If yes please indicate any potential conflicts) — YES ____ NO ✓

14 Have there been or are there now any business circumstances which — YES ____ NO ✓

might reflect adversely on the propriety of your serving as a member of any body to which you might be appointed?

15 How many meetings of the Commission Board or Committee to which you are interested in being appointed have you attended in the last year? 15

16 How much time on a monthly basis do you anticipate spending on preparation for and attendance at meetings of the body to which you desire appointment?

6 hr / mo

17 Why are you interested in appointment to a City Commission Board Committee or Task Force?

I have been on this Outstanding Committee for years. During this time I have served as chair and vice chair. As chair the committee entertained the Carnival for children with disabilities, which some of the Council members attended & enlisted several community organizations to participate, donate and contribute. The outcome was an amazing community activity. I want to continue

18 What is there specifically in your background training education or interests which qualifies you as an appointee?

I have been employed as a Rehabilitation Counselor for 20 years. It has been my lifetime career to assist people with disabilities live a more satisfying life by assisting them to be more independent in their community and work environments. I have educated employers and community organizations on A D A, accommodating people with disabilities and assisted their families on obtaining community services.

19 What do you see as the objectives and goals of the body to which you seek appointment?

the C C D A C function is to be certain that residents of our wonderful community have equal access to the community services and activities so that they may live a more independent life for themselves and their families. To identify barrier within the City that may cause hardships and limit accessibility for those with disabilities. To educate the community on disabilities which will allow our citizens a more acceptable integration into activities in our City.

20 How would you recommend the objectives and goals of the body be changed or augmented?

I would like to offer more outreach to City services and businesses in our Community on people with disabilities, their needs and desire to participate in community activities and employment, to break down barriers and allow more understanding and acceptance of people with disabilities.

21 How would you help achieve the body's established objectives and goals?

I would continue doing outreach to the Community, such as the Children's Carnival, where we have so many people impressed with this event that we have donations, sponsorships,

residents which has made this event an overwhelming success! I will continue to evaluate the city for accessibility, such as Curbcuts crosswalks, and pedestrian traffic flow to shopping and businesses in our Community I will take a proactive position in attending meetings and community activities to assess, evaluate accessibility so members of our community with disabilities have equal access to our city's activities

22 What special qualities can you bring to the body to which you seek appointment?

I have over 20 years of experience working with people with disabilities I have developed liaisons with agencies, schools and services which assist people with disabilities I am familiar with terminology, treatment and adaptive equipment related to people with disabilities I am aware of numerous services available through various government agencies. Social Security, Access Service, Dept of Rehab Independent Living Centers, Regional Centers housing, shelters etc

REMINDER **All information on this application will become a public record and be available for public inspection or duplication as authorized by law**

I hereby certify that the foregoing information is correct to the best of my knowledge

Signature Robyn Fernandez Date 5/9/06

You are invited to attach additional pages enclose a copy of your resume or submit supplemental information which you feel may assist the City Council in its evaluation of your application

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City of Culver City
Attention City Clerk
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Culver City CA 90232-0507

(310) 253-5851

OPTIONAL

In order to assist the City Council in seeking to balance appointments in terms of geographic location of residence and/or business ethnicity gender and age the following information is desirable but not required for application submission or appointment

If a City resident for how long? 25 yrs If a City business owner/operator for how long? no

Year of Birth_____ Male_____ Female X Ethnicity_____

5/98 jhc