Colorado Office of Public Guardianship

Director, Sophia M. Alvarez

Commissioners

Deb Bennett-Woods, Chair Stephanie Garcia, Vice-Chair Kelsey Lesco Spencer Crona Patrick Thiessen



3900 East Mexico Avenue Suite 300 Denver, CO 80210 (720) 552-5215 Info@Colorado-OPG.org

Stakeholder Advisory Panel Application Short Form

1.		ome Address:
		ome Phone: Work Phone:
	Pre	eferred Method of Contact: Home Phone Work Phone Email
	Ge	ender identity/expression: Prefer not to answer
	Ple	American Indian or Alaska Native Asian Black or African American Hispanic, Latino, or Spanish origin Middle Eastern or North African Native Hawaiian or Other Pacific Islander White or Caucasian Other race, ethnicity, or origin Decline to answer
	M	ilitary Status. Check any that apply.:
		Active Military
		Active Reserve
		Veteran
		Not applicable
		Decline to answer

2.	Why are you interested in serving as a member of the OPG Stakeholder Advisory Panel?		
3.	The OPG Stakeholder Advisory Panel may meet quarterly during the lunchtime or evening. The meeting generally lasts about one (1) hour. Do you have any standing commitments that create a scheduling conflict for you? Yes No Are there better days or times of day that work for you? Yes No Are you able to commit to quarterly meetings, at a minimum? Yes No Will you need transportation to attend meetings? Yes No Will you need access to attend meetings virtually? Yes No		
4.	Is there anything that you'd like to share about your life or experiences that will help the OPG Stakeholder Advisory Panel?		
	DI FACE DETUDNI FORM TO CO ODC		
	PLEASE RETURN FORM TO CO OPG:		
	Info@Colorado-OPG.org or Fax: 720.552.5215 or		

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Denver, CO 80210

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