

Workforce Board 2020-21

County	Member	Sector	Term Expiration
Amelia	Roger Scott	Business/Comm. Based Org.	June 30, 2022
	Donald Garrett	Business	June 30, 2021
	Gregg Faulkner	Business	June 30, 2021
Brunswick	Sylvia Allen	Business	June 30, 2022
	Vacancy	Business	
	Vacancy		
Buckingham	Stephanie Coleman	Dept. of Social Services	June 30, 2022
	Vacancy	Business	
	Vacancy	Business	
Charlotte	Gary Walker	Business/Comm. Based Org.	June 30, 2022
	Bradley Wike	Business/Labor/Apprentice	June 30, 2022
	Keith Harkins	Community College	June 30, 2021
Cumberland	Vacancy	Business	
	Vacancy	Business	
	Addison Gills	Community-Based Org/CTE	June 30, 2022
	Elizabeth Jamerson	K-12 Education/Labor/CTE	June 30, 2022
Halifax	Russ Irby	Business	January 31, 2022
	Lisa Crews	Business	June 30, 2021
	Mike Dolianitis	VEC	June 30, 2021
Lunenburg	Trisha Currin	Business	June 30, 2021
	John B. Mahaney, Jr.	Business	June 30, 2021
	Jessie B. Otey	Business	June 30, 2021
	Sharon Harrup	Comm. Based Org.	June 30, 2021
Mecklenburg	Jeremy Satterfield	Business	June 30, 2021
	Donnie Williams	Business	June 30, 2021
	Michelle Whitlow	Business	January 31, 2022
Nottoway	Rodney Reynolds	Business	January 31, 2022
	Vacancy	Business	
	Katie Irby	Adult Education	June 30, 2021
Prince Edward	Kate Pickett	Economic Development	June 20, 2021
	Sheri McGuire	Higher Ed./Ec. Dev.	June 30, 2021
	Asha Moses	DARS	June 30, 2021
	Margaret Taylor-Collins	Business	June 30, 2021
	Mark Webb	Business	June 30, 2021

Business members of the Board are nominated by the Board of Supervisors of the county of the business represented. Business members must be in optimum decision-making roles for the business.

Other members are nominated by the organization he/she represents.

I NOMINATION FORM

1-Name (First, MI, Last)		2-LWDA #		3-Date	
4-Street Address			13-Nominee Characteristics		
5-City		6-County		Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	
7-State Virginia		8-ZIP		Race:	
9-Home Phone (include area code)		10-Work Phone (include area code)		White <input type="checkbox"/> Black <input type="checkbox"/>	
11-FAX		12-E-Mail		Hispanic <input type="checkbox"/> Amer. Indian <input type="checkbox"/>	
15-LWDA Name			14-Recommended for (see section number)		
16-Labor/ CBO/ Apprenticeship Representative			16- Labor/ CBO/ Apprenticeship <input type="checkbox"/>		
Title _____ Labor <input type="checkbox"/> CBO <input type="checkbox"/> Organization Registered Apprenticeship <input type="checkbox"/>			17-Private Sector (Business) <input type="checkbox"/>		
17-Private Sector (Business) Representative			18-Education <input type="checkbox"/>		
Title _____ Business _____ Type of Business _____			19-VEC <input type="checkbox"/>		
18-Education Representative			20-Economic Development <input type="checkbox"/>		
Title _____ Institution _____ Title II <input type="checkbox"/> Community College <input type="checkbox"/> Career & Technical Education <input type="checkbox"/>			21-VDARS/VDBVI <input type="checkbox"/>		
20-Economic Development Representative			22-DSS <input type="checkbox"/>		
Title _____			23-Optional/Other <input type="checkbox"/>		
24-Nominator			17-Private Sector (Business) Representative		
<i>I hereby recommend the above-named person for membership on the Local Workforce Development Board.</i> _____ <i>Signature</i> <i>Date</i> _____ <i>Printed/Typed Name & Title of Nominator</i> _____ <i>Nominator Organization</i> _____ <i>Phone</i> <i>FAX</i> _____ <i>Email</i>			Yes No Minority-Owned Business <input type="checkbox"/> <input type="checkbox"/> Female-Owned Business <input type="checkbox"/> <input type="checkbox"/> Urban <input type="checkbox"/> Suburban <input type="checkbox"/> Rural <input type="checkbox"/> Number of Employees _____		
21-VDARS/VDBVI Representative			19-VEC Representative		
Title _____			Title _____		
22-DSS Representative			24-Nominator		
Title _____			<i>I hereby recommend the above-named person for membership on the Local Workforce Development Board.</i> _____ <i>Signature</i> <i>Date</i> _____ <i>Printed/Typed Name & Title of Nominator</i> _____ <i>Nominator Organization</i> _____ <i>Phone</i> <i>FAX</i> _____ <i>Email</i>		
23-Optional/ Other Representative			25-Action by Chief Elected Official		
Title _____ Agency _____			Subject to certification required by Section 107 of the Workforce Innovation and Opportunity Act of 2014 and Policy 200-04 (2016) (Revised July 1, 2016) of the Virginia Board for Workforce Development, the person nominated herein has been duly appointed to the Local Workforce Development Board by the Chief Elected Officials. Term of Appointment: From _____ To _____		
_____ <i>Signature of Chief Elected Official</i>			_____ <i>Date</i>		