# Profile

	Danette	Rhoads		
Prefix	First Name	Last Name	Suffix	
Street Addr	ess		Suite or Apt	
10 - D				
City			State	Postal Code
Email Addr	ess			
Compu	tershare	Human Resources		
Employer		Occupation		
District	9			
What distric	t do you live in?			
San State Ball Ba				
Primary Ph	one	Alternate Phone		
Interes	ts *			
🛛 Hum	nan Resources			
🖂 Neig	ghborhoods			
🛛 Pub	lic Health			
	lic Safety			
🛛 Rec	reation			
Volunt	eer Activities			

American Lung Association (Louisville, KY) Balfour Memory Care Services (Boulder, CO) Blue River Services (Corydon, IN)

Which Boards would you like to apply for?

⊖ Yes ● No

If Yes, Please List

Please answer the following questions. If you answer yes, please include relevant details (i.e. position, company, address, dates, etc.) in the Additional Notes section below.

Are you employed by Louisville Metro Government?

 $\bigcirc$  Yes  ${\ensuremath{\, \hbox{\scriptsize O}}}$  No

Do you or a member of your immediate family have ownership interest in any company that does business with Louisville Metro Government?

 $\bigcirc$  Yes  $\ \mbox{O}$  No

Do you or a member of your immediate family have ownership interest in any property that is the subject of a condemnation proceeding, planning and zoning proceeding or any other administrative or court proceeding in which Louisville Metro Government or its agencies are interested parties?

 $\bigcirc$  Yes  ${\ensuremath{\, \hbox{\scriptsize O}}}$  No

Do you have any contract or matter pending before any Louisville Metro Government agency?

 $\bigcirc$  Yes  $\ensuremath{\, \ensuremath{ \ensuremath{ \otimes } }}$  No

Have you ever been sued by the former City of Louisville, Jefferson County or Louisville Metro Government?

 $\bigcirc$  Yes No

Additional Notes

Resume-Danette\_Rhoads\_HR\_2015\_Sept.pdf Upload a Resume

## **Background Check**

We require a criminal background check for all appointed members.



I authorize Louisville Metro Government and the Administrative Office of the Courts to search public records for any relevant information regarding me.

 ${\ensuremath{\, \bullet }}$  Yes  ${\ensuremath{\, \cap }}$  No

Please enter Maiden/Previous Names, if applicable.

### Demographics

Some boards and commissions require membership to be racially, politically or geographically proportionate to the general public. Please complete the information requested below.

#### Caucasian (non-Hispanic)

Ethnicity

#### Democrat

Political Party

### Female

Gender



Date of Birth

If you need assistance, please contact Julie Radican via phone 502-574-2003 or via email at Julie.radican@louisvilleky.gov