

APPLICATION FOR APPOINTMENT

For  
Helen Farabee Centers  
Board of Trustees

Name: Charlotte "Jan" Driver Ward  
Mailing Address: PO Box 38 Windthorst, Tx. 76389  
Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
FAX #: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Portions of the Texas Health and Safety Code Title 7, Subtitle A, Chapter 534, require that local agencies appoint members to the board from among the qualified voters who reside within the region to be served by the Center. The Chapter also requires an attempt for board appointments to reflect the ethnic and geographic diversity of the local service area of the community center. The Chapter requires at least one member of the Centers' Board of Trustees to be a consumer of the types of services the center provides or a family member of a consumer of the types of services the center provides. In order to assist the appointing entity in assuring these requirements are met, we ask that you please complete the following.

County of Residence: Archer Length of Residence in County: 6 months

Are you a qualified voter?  Yes  No

Consumer / Family:  I am a consumer of the types of services provided by the center.  
 I am a family member of a consumer of the types of services provided by the center.

Ethnic Background:  Black  Caucasian  Asian  Hispanic  Other

Gender (optional):  Male  Female

Age group (optional):  18-30  31-45  46-60  60+

Current Business / Profession / Employment:

Name of Company: retired WFISD general education / SpEd

Address: \_\_\_\_\_  
teacher

Phone: \_\_\_\_\_

Current Position: \_\_\_\_\_

Educational Background: Bachelor of Science in Education MSU  
1986

**Previous Community Volunteer Experience:**

Loaned Executive + Team Leader United Way 2008-2012

Leadership Wichita Falls Class of 2012 Board 2012-2018

The Kitchen Board 2013-2015

**Current Community Service Commitments:**

none presently

**References:**

Name: Reggie + Becca Coe (pastor) Daytime Phone: \_\_\_\_\_

Name: Cynthia Morgan (teaching partner) Daytime Phone: \_\_\_\_\_

**Explain your interest in community based mental health and/or intellectual and developmental disabilities services:**

I have always been drawn to children + adults with special needs. My years teaching, especially at NTEH, challenged me to grow instructionally as a SPED teacher

**Explain what talents / perspectives you feel you would bring to the Board:**

My last 10 years as an educator were spent in special education. I have worked with 1<sup>st</sup> - 12 graders with a variety of disabilities. I had to often think out of the box to meet their needs

Are you related to a current employee of the Center? \_\_\_\_\_ Yes

Yes

No

No

w/ behavior and academic

If yes, please give staff name and how related: \_\_\_\_\_

Are you available to give an average of 8 hours per month (excluding travel time) to Center business?

Yes  No

Board and Committee meetings are held on the 1<sup>st</sup> Thursday of every month from 11 am - 4 pm. Meeting location rotates each month to different Center service sites throughout our region. Would you be able to accommodate this schedule?

Yes  No

Barring unforeseen circumstances, can you make at least a two-year commitment to serve on this Board?

Yes  No

Are you available to attend quarterly out-of-town board related activities that would require overnight stays?

Yes  No

In addition to monthly committee and Board meetings, are you available to occasionally consult with other Board members or staff regarding Center business?

Yes  No

Are you available to visit Center service sites within your appointment area?

Yes  No

Other than specific conflict of interest disclosures made on the attached Conflict of Interest Questionnaire, do you feel you have any personal or professional perspectives that would inhibit your ability to perform Board duties in a fair and objective manner?

Yes  No

If "yes," please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C Jan Drive Ward

Signature of Applicant

Date 2/9/23

**CONFLICT OF INTEREST QUESTIONNAIRE**

for  
Helen Farabee Centers  
Board of Trustee Applicant

**To be completed and submitted with application to serve on Board of Trustees.**

Applicant Name: Charlotte "Jan" Driver Ward

County of Residence: Archer

**In responding to these questions, please note that a "yes" answer does not imply that the relationship or transaction was necessarily inappropriate.**

1. Are you an officer or director of any corporation with which the Centers' Board of Trustees has business dealings?  Yes  No

If "yes," please list the names of such corporations, the office held and the approximate dollar amount of business involved with the Centers' Board of Trustees last year.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Do you, or does any member of your family, have a financial interest in, or receive any remuneration or income from, any business organization with which the Centers' Board of Trustees have business dealings?  Yes  No

If "yes," please provide the following information:

- A. Names of the business organizations in which the interest is held and the persons by whom the interest is held:

\_\_\_\_\_

- B. Nature and amount of each such financial interest, remuneration or income:

\_\_\_\_\_

3. Did you, or any member of your family, receive during the past twelve months any gifts or loans from any source from which the Centers' Board of Trustees buys goods or services or with which the nonprofit has significant business dealings? Yes  No

If "yes," list the gifts or loans as follows:

| Name of Source | Item | Approximate Value |
|----------------|------|-------------------|
|                |      |                   |
|                |      |                   |
|                |      |                   |
|                |      |                   |

4. Were you involved in any other activity during the past year that might be interpreted as possible conflict of interest? Yes  No

If "yes," please describe:

|  |  |
|--|--|
|  |  |
|  |  |
|  |  |

**I certify that the foregoing information is true and complete to the best of my knowledge.**

C Jan River Ward  
Signature of Applicant

2/9/23  
Date

APPLICATION FOR APPOINTMENT

For  
Helen Farabee Centers  
Board of Trustees

Name: Mark Neese  
Mailing Address: 6371 Picket Run Road Sunset, TX 76270  
Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
FAX #: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Portions of the Texas Health and Safety Code – Title 7, Subtitle A, Chapter 534, require that local agencies appoint members to the board from among the qualified voters who reside within the region to be served by the Center. The Chapter also requires an attempt for board appointments to reflect the ethnic and geographic diversity of the local service area of the community center. The Chapter requires at least one member of the Centers' Board of Trustees to be a consumer of the types of services the center provides or a family member of a consumer of the types of services the center provides. In order to assist the appointing entity in assuring these requirements are met, we ask that you please complete the following.

County of Residence: Montague Length of Residence in County: 18 years

Are you a qualified voter?  Yes  No

Consumer / Family:  I am a consumer of the types of services provided by the center.  
 I am a family member of a consumer of the types of services provided by the center.

Ethnic Background:  Black  Caucasian  Asian  Hispanic  Other

Gender (optional):  Male  Female

Age group (optional):  18-30  31-45  46-60  60+

Current Business / Profession / Employment:

Name of Company: Bowie ISD

Address: 405 Lovers Lane

Phone: 940 689-2921

Current Position: Elementary Counselor

Educational Background: BA - Ouachita Baptist Univ

MA + EdD - Dallas Baptist Univ

Previous Community Volunteer Experience: Montague County Child Welfare Board, Church Camp Counselor - Camp Copess

Current Community Service Commitments: Montague County Child Welfare Board

**References:**

Name: Kathy Green - Principal BES Daytime Phone: \_\_\_\_\_

Name: Paul Magee SRO - Boone ES Daytime Phone: \_\_\_\_\_

**Explain your interest in community based mental health and/or intellectual and developmental disabilities services:**

As a counselor, we have students and families who use these services.

**Explain what talents / perspectives you feel you would bring to the Board:** Counseling

experience, understanding the needs of rural communities

Are you related to a current employee of the Center? \_\_\_\_\_ Yes  No

If yes, please give staff name and how related: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you available to give an average of 8 hours per month (excluding travel time) to Center business?  Yes  No

Board and Committee meetings are held on the 1<sup>st</sup> Thursday of every month from 11 am – 4 pm. Meeting location rotates each month to different Center service sites throughout our region. Would you be able to accommodate this schedule?  Yes  No

Barring unforeseen circumstances, can you make at least a two-year commitment to serve on this Board?  Yes  No

Are you available to attend quarterly out-of-town board related activities that would require overnight stays? *possibly depends on times*  Yes  No

In addition to monthly committee and Board meetings, are you available to occasionally consult with other Board members or staff regarding Center business?  Yes  No

Are you available to visit Center service sites within your appointment area?  Yes  No

Other than specific conflict of interest disclosures made on the attached Conflict of Interest Questionnaire, do you feel you have any personal or professional perspectives that would inhibit your ability to perform Board duties in a fair and objective manner?  Yes  No

If "yes," please describe: *BA+MA in Counseling a passion for families and students to be successful*

  
Signature of Applicant

Date *12/05/2022*



**CONFLICT OF INTEREST QUESTIONNAIRE**

for  
Helen Farabee Centers  
Board of Trustee Applicant

**To be completed and submitted with application to serve on Board of Trustees.**

Applicant Name: Mark Neese

County of Residence: Montague

**In responding to these questions, please note that a "yes" answer does not imply that the relationship or transaction was necessarily inappropriate.**

1. Are you an officer or director of any corporation with which the Centers' Board of Trustees has business dealings?  Yes  No

If "yes," please list the names of such corporations, the office held and the approximate dollar amount of business involved with the Centers' Board of Trustees last year.

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2. Do you, or does any member of your family, have a financial interest in, or receive any remuneration or income from, any business organization with which the Centers' Board of Trustees have business dealings?  Yes  No

If "yes," please provide the following information:

- A. Names of the business organizations in which the interest is held and the persons by whom the interest is held:

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- B. Nature and amount of each such financial interest, remuneration or income:

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3. Did you, or any member of your family, receive during the past twelve months any gifts or loans from any source from which the Centers' Board of Trustees buys goods or services or with which the nonprofit has significant business dealings?

Yes  No

If "yes," list the gifts or loans as follows:

| Name of Source | Item  | Approximate Value |
|----------------|-------|-------------------|
| _____          | _____ | _____             |
| _____          | _____ | _____             |
| _____          | _____ | _____             |
| _____          | _____ | _____             |

4. Were you involved in any other activity during the past year that might be interpreted as possible conflict of interest?

Yes  No

If "yes," please describe:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that the foregoing information is true and complete to the best of my knowledge.

Mark Neese  
Signature of Applicant

12/05/2022  
Date