

Nevada Lifespan Respite Care Coalition

- Application for Appointment-

Complete the form below for consideration to be appointed to the Nevada Lifespan Respite Care Coalition (NLRCC), an advisory body under the Nevada Aging and Disability Services Division. Answer all questions or enter 'N/A' where applicable.

Appointments can take several weeks to process. Inquiries can be sent via email to: (NLRCC@adsd.nv.gov).

This form will record your name, please fill your name.

Coalition Interest

Please provide information about your interest in serving on the NLRCC along with your current contact information.

- 1. Please specify which position on the NLRCC you are interested in.
 - The parents of a minor child either have a disability or chronic health care condition.
 - Family caregivers of an adult over the age of 18 who either has a disability or chronic health care condition.
 - Compound family caregiver, taking care of more than one person with disabilities or chronic care needs.
 - Represent an organization that provides caregiver relief such as palliative care, personal care, or other in-home services.
 - Represent an organization that provides services to children with disabilities.
 - Representative of an organization that provides caregiver support services to family caregivers who care for someone over the age of 18.
 - State agency that provides funding for respite and caregiver support services.
 - Representative of the State's No Wrong Door, Nevada Care Connection initiative.
 - Provides services to veterans with long term care needs and/or their family caregivers.
 - Direct services workers or volunteers, providing temporary services for family caregivers.
- 2. Provide your full legal name.
- 3. Provide your preferred name/title/pronouns.
- 4. Briefly describe the reason for your interest in serving on the NLRCC.

- 5. provide your mailing address (street, city, zip code and county)
- 6. Provide your contact information including preferences (phone number (s) and email address.

Background and Experience

This section collects information related to your background and experience.

- 7. Provide the name of your current employer. If you are a business owner, enter the name of your business.
- 8. Describe your current title and duties, if applicable.
- 9. Briefly describe your educational background (degrees, schools, training, or certifications).
- 10. Have you ever been convicted of a misdemeanor, gross misdemeanor, or felony? If yes, please explain.

Demographics

This section collects basic demographic information regarding applicants. most of this information is optional and is collected for data purposes only.

- 11. What year did you become a NV resident?
- 12. Ethnicity
- 13. Citizenship/Status in US
- 14. Veteran/Military Status