San Antonio Water System Board of Trustees (SAWS) Other North Sector, Chair	Application No: No: 20200521213352_9753
ELIGIBILITY	
PROFILE	
Prefix	MS.
Last Name	Burley
First Name	
Middle Name	Jelynne LeBlanc
Suffix	
Preferred Name	Talvena
	Jelynne
Title	
Address Type?	
Address	
City	
State	
Zip	78258
Phone Type?	
Phone number	
Phone 2 Type?	
Phone 2 number	
eMail	
Employer	The Center for Health Care Services
Job Title	President / CEO
Occupation	Local Mental Health Authority
Board/Commission/Committee Name	San Antonio Water System Board of Trustees (SAWS)~Other~North Sector, Chair~04
DEMOGRAPHIC INFORMATION	
The City of San Antonio strives for boards and commissions to be representative of our diverse community. Providing the following demographic information is voluntary, and will only be used for statistical and reporting purposes.	
Race/Ethnicity (Please select all that apply):	Black or African American
Gender:	Female
Age:	55 to 64
Do you identify as a sexual minority (such as lesbian, gay, bisexual, queer, etc.)?	No
QUESTIONS	
If this board position requires residency within Bexar	Yes

County, the City of San Antonio city limits or within a particular council district, do you meet those residency requirements?	
Are you a City of San Antonio resident?	Yes
San Antonio Resident Length - Years	40
In which City Council District do you reside?	08
How many years have you lived in the City Council District where you reside?	03
Do you or any of your immediate family members or any businesses that you or they own currently have any direct or indirect financial interest in any contract(s) with the City, including subcontracts?	No
Will you or any of your immediate family members or any businesses that you or they own seek a contract(s) with the City in the foreseeable future?	No
Do you or any of your immediate family members or any businesses that you or they own have any financial interest, direct or indirect, in any sale to the City of any land, materials, supplies, or service?	No
Will you or any of your immediate family members of any businesses that you or they own seek or take part, either directly or indirectly, in any sale of land, materials, supplies, or service to the City in the foreseeable future?	No
Does your employer or an employer of your immediate family members have a contract with the City?	No
Do you or any of your family members currently serve or in the past year served as an administrative aide to a Councilmember?	No
Do you currently serve in any elected or appointed public government office?	Yes
Please list office, board or commission, your position in that entity and term of service.	CEO for the Local Mental Health Authority
Are you a member and/or officer and/or employee of any boards, commissions, corporations, non-profit entities, agencies, or other entities?	Yes
Give the title and dates of any position which you have held in such organization:	NuStar-Independent Director- Present TPR BOD Present, Vice Chair Trinity University BOT Present GSSWT BOD, present Vice Chair GSSWT BOD
Do you receive any compensation for service on this entity(ies)?	Yes
If yes, please describe compensation, for example - \$20 per meeting.	No compensation with the exception of NuStar. Annual retainer.
Do you intend to seek election or appointment to any public office or board or commission in the foreseeable future?	No
Have you ever been hired for a position with the City of	Yes

List the department(s) and date(s):	Employee for 24 years, various departments, retired as Deputy City Manager 2008
Reason for leaving City employment:	Retired
Describe your Educational history.	BA 1982 SOUTHERN UNIVERSITY, BR, LOUISIANA MA 1988 TRINITY UNIVERSITY , SA TEXAS CONSTRUCTION EXECUTIVE 1999, TAMU, COLLEGE STATION TEXAS
Describe your Professional History & Certification designations (Current and historical).	SEASONED LOCAL GOVERNMENT PROFESSIONAL WITH 36 YEARS OF MUNICIPAL GOVERNMENT, AND MUNICIPAL UTILITY EXPERIENCE. EXPERTISE IN ECONOMIC DEVELOPMENT, FACILITY PLANNING AND DEVELOPMENT, SPORTS FRANCHISE NEGOTIATIONS, HOUSING AND COMMUNITY PLANNING AND DEVELOPMENT, CODE COMPLIANCE, ELECTRIC AND GAS GENERATION AND DISTRIBUTION, CUSTOMER SERVICE , UTILITY RATEMAKING, AND HUMAN CAPITAL DEVELOPMENT AND MANAGEMENT.
Describe your Volunteer Experience & Community Service	I HAVE A LONG HISTORY OF COMMUNITY SERVICE IN SPITE OF MY MUNICIPAL PROFESSIONAL POSITIONS. I HAVE SERVED ON NUMEROUS BOARDS RANGING FROM UNITED WAY, CARVER CULTURAL COMMUNITY CENTER, PROVIDENCE HIGH SCHOOL BOARD, ALAMO CHAMBER OF COMMERCE, SAGE, WOMENS HALL OF FAME, HISPANIC CHAMBER OF COMMERCE, ECONOMIC DEVELOPMENT FOUNDATION AND GREATER SA CHAMBER OF COMMERCE.
Please provide a brief narrative outlining your reasons for seeking appointment to this board or commission:	GIVEN MY VAST BACKGROUND AND EXPERIENCE WITH MUNICIPAL GOVERNMENT AND MUNICIPALLY OWNED UTILITIES I BELIEVE THIS POSITIONS ME TO PROVIDE THE GOVERNANCE AND VISON REQUIRED TO BE AN EFFECTIVE BOARD MEMBER. I AM WELL VERSED IN THE ORGANIZATIONAL DYNAMICS OF CORPORATE, AND GOVERNMENTAL AFFAIRS, FINANCIAL STEWARDSHIP AND CUSTOMER AND RATE PAYER ACCOUNTABILITY.

APPLICATION SIGN-OFF	
As a board, commission, or committee member, you will be asked to adhere to: Code of Ordinances, City of San Antonio, Part II, Chapter 2, Article IX, Sec.2-534. All board and commission members must file a Financial Disclosure Report with the Office of the City Clerk upon appointment, and annually thereafter, throughout the member's term. Failure to file a Financial Disclosure Report within the time required by the City's Ethics Code will be considered an automatic removal.	
I understand that if any member of the public makes a request for information included in this Application for Appointment, most of the information must be disclosed under the Public Information Act. I understand that the City of San Antonio will attempt to maintain the confidentiality of highly private matters by seeking an Attorney General's opinion in accordance with the Public Information Act. I understand that it may not be legally possible to maintain the confidentiality of such information, and I hereby release the City of San Antonio, and its agents, employees and officers, from any and all liability whatsoever if the information must be released pursuant to the Public Information Act or any other law requiring its release.	Acknowledged
I recognize that I am an applicant for San Antonio Water System Board of Trustees (SAWS)~Other~North Sector, Chair~04, as a City of San Antonio board or commission that is more than advisory in nature. As a city officer, I understand that I, my immediate family members, and any business in which I and/or they hold a 10% or greater ownership interest will be prohibited from seeking or accepting contracts with the city for the duration of my service on this board. I further understand that this restriction will extend with regard to many types of discretionary contracts for a period of one year after leaving city service.	Acknowledged
OATH: I have read and understand the guidelines set out in this application. The foregoing statements are true, accurate, and complete. I agree that any misrepresentation or omission of facts may result in my disqualification for appointment.	Acknowledged
Enter Your Name	JELYNNE LEBLANC BURLEY
Date of submission.	5/21/2020
The Texas Public Information Act provides that each government official may choose whether to allow the public access to the information in the custody of the City that contains your home address, home telephone number, or reveals whether you have family members. Please note that this does not apply to business addresses, which are subject to public disclosure. If an open records	

request is filed requesting to view or obtain records that contain your personal information, the City will take steps to protect your personal information as authorized by the Texas Public Information Act, but only if you have elected to protect personal information.	
I want the public to have access to my Home Address.	No
I want the public to have access to my Home Telephone Number.	No
I want the public to have access to my Social Security Number.	No
I want the public to have access to my Emergency Contact Information.	No
I want the public to have access to my Family Information.	No
Please attach any additional information, such as a current resume, using the Attachments panel at the bottom of this page.	