

Disability Access Advisory Committee District 6 Consumer of Handicapped Services	Application No: No: 20220225081446_12486
ELIGIBILITY	
PROFILE	
Prefix	Mrs.
Last Name	Lopez
First Name	Laura
Middle Name	Sifuentes
Suffix	
Preferred Name	Laura
Title	
Are you a City of San Antonio resident?	Yes
San Antonio Resident Length - Years	16
In which City Council District do you reside?	06
How many years have you lived in the City Council District where you reside?	07
Address Type?	Residence
Address	
City	San Antonio
State	TX
Zip	78251
Phone Type?	Cell
Phone number	4
Phone 2 Type?	Cell
Phone 2 number	
Type?	Business
Address 2	
City 2	San Antonio
State 2	TX
Zip 2	
eMail	
Employer	Bexar County CSCD
Job Title	CSO III
Occupation	Supervision Officer
Board/Commission/Committee Name	Disability Access Advisory Committee~District 6~Consumer of Handicapped Services~01
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):	Hispanic/Latino/a
Gender	Female
Age:	35 to 44
Do you identify as a sexual minority (such as lesbian, gay, bisexual, queer, etc.)?	No
QUESTIONS	
If this board position requires residency within Bexar County, the City of San Antonio city limits or within a particular council district, do you meet those residency requirements?	Yes
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
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?	No
Are you a member and/or officer and/or employee of any boards, commissions, corporations, non-profit entities, agencies, or other entities?	No
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 San Antonio?	No
Describe your Educational history.	Master of Science in Criminal Justice-Texas State Univ. Bachelor of Arts in Political Science-Texas A and M- Corpus Christi Associate of Arts in General Education-SWTJC
Describe your Professional History & Certification designations (Current and historical).	I have been working as a supervision officer for Bexar County CSCD for the past 10 years. I have also been working seasonally at David's Bridal for the past 11 yrs.
Describe your Volunteer Experience & Community Service	My husband and I are very active with the Down Syndrome Association of South Texas and I have been a mentor with Big Brothers Big Sisters in the past.
Please provide a brief narrative outlining your reasons for seeking appointment to this board or commission:	I am a mother to a special needs child so to make

	contacts and help guide others towards the services the city has to offer would be a great opportunity. I am very vested in protecting our most vulnerable and would love the opportunity to help out others in the community.
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
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	Laura S. Lopez
Date of submission.	2/25/2022
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.	Yes
I want the public to have access to my Home Telephone Number.	Yes
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.	