

**Wheels Accessible Advisory Committee****WAAC**

SUBJECT: WAAC Recruitment for Positions 2016/2017

FROM: Kadri Klm, Paratransit Planner

DATE: May 11, 2016

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**Action Requested**

Information only.

**Background**

In June 2016, terms will expire for six WAAC members:

1. Russ Riley – Livermore Representative
2. Connie Mack – Dublin Alternate
3. Herb Hastings – Alameda County Representative
4. Jennifer Cullen – Social Services Representative
5. Pam Deaton – Social Services Representative
6. Amy Mauldin – Social Services Representative

Also, the Dublin member Sue Tuite and Pleasanton alternate Shirley Maltby recently resigned from the committee.

**Discussion**

LAVTA received seven applications for FY 2016/2017 open positions:

Dublin (1 member and 1 alternate needed)

- Connie Mack

Livermore (1 member needed)

- Russ Riley

Pleasanton (1 member needed)

- Regina Linse

Social Services (3 members and 1 alternate needed)

- Jennifer Cullen
- Pam Deaton
- Amy Mauldin

County of Alameda Seat (1 member and 1 alternate needed)

- Herb Hastings

### **Next Steps**

Per WAAC bylaws, LAVTA's Board of Directors will review the applications and select WAAC members. New appointees will be ratified at the Board's June meeting and start serving in the committee as of July, 2015.

Attachment:

- WAAC Applications

## APPLICATION FOR WAAC MEMBERSHIP

### GENERAL INFORMATION

Name CONNIE F. MACK

Agency (if applicable) DUBLIN

Address 3115 FINNIAN WAY #238

City DUBLIN Zip 94568

Home # (925) 829-2457 Work # — Mobile # (925) 997-3692

Email address: FOXELAD@COMCAST.NET

**Which of the following open positions are you applying for?**  
(May check more than one, if applicable.)

City of Dublin	<u>✓</u>
City of Pleasanton	<u>                    </u>
City of Livermore	<u>                    </u>
Alameda County	<u>                    </u>
Social Services Agency	<u>                    </u>

**You are eligible for your position because you are**

**A resident of the City or County and are**

Elderly	<u>✓</u>
Disabled	<u>                    </u>
A Caretaker for a Disabled person	<u>                    </u>

**Or**

Employed in Social Services in the Tri Valley

1. Do you or your clients use Dial-A-Ride? If yes, how often?

SOMEONE I KNOW USES IT ABOUT ONCE  
A WEEK

2. Do you or your clients use Fixed Route service? If yes, how often?

SOMEONE I KNOW USES IT 3-4 TIMES  
A WEEK.

3. In a single statement, why do you want to be on this committee?

I HAVE LEARNED A LOT BY BEING ON THE  
COMMITTEE, AND HAVE PASSED THIS INFORMATION  
ON TO OTHERS. HOPEFULLY - I CAN CONTINUE  
TO LEARN AND PASS INFORMATION ON TO  
OTHERS.

4. What skills and knowledge do you feel you bring to this committee?

I HAVE GOOD LISTENING SKILLS AND  
WILL ASK QUESTIONS FOR CLARIFICATION.

5. Will you be able to attend meetings during regular business hours? How flexible is your schedule?

MY SCHEDULE IS FLEXIBLE ENOUGH TO  
ATTEND MEETINGS DURING BUSINESS  
HOURS.

6. Please include any additional information that may assist the decision making process.

I WOULD CONSIDER IT AN HONOR TO CONTINUE  
REPRESENTING DUBLIN ON THIS COMMITTEE.



## APPLICATION FOR WAAC MEMBERSHIP

### GENERAL INFORMATION

Name Russ Riley

Agency (if applicable) \_\_\_\_\_

Address 4506 Lee Ann Circle

City Livermore Zip 94550

Home # 925-443-0732 Work # N/A Mobile # 925-487-7212

Email address: russriley@netscape.net

**Which of the following open positions are you applying for?**  
(May check more than one, if applicable.)

City of Dublin	_____
City of Pleasanton	_____
City of Livermore	<u>X</u>
Alameda County	_____
Social Services Agency	_____

**You are eligible for your position because you are**

**A resident of the City or County and are**

Elderly	<u>X</u>
Disabled	_____
A Caretaker for a Disabled person	_____

**Or**

Employed in Social Services in the Tri Valley \_\_\_\_\_

1. Do you or your clients use Dial-A-Ride? If yes, how often?

No

2. Do you or your clients use Fixed Route service? If yes, how often?

1-2 times per month

3. In a single statement, why do you want to be on this committee?

I have years of experience serving on this advisory committee and have participated in many changes in service providers and ridership needs. Continuity and historical narrative are valuable assets can offer to the committee.

4. What skills and knowledge do you feel you bring to this committee?

Have monitored the development and changes in various transportation options. Have provided input to local and federal representatives regarding funding and need for non-car based services.

5. Will you be able to attend meetings during regular business hours? How flexible is your schedule?

Retired educator - flexible schedule.

6. Please include any additional information that may assist the decision making process.

Have assisted individuals in our community with accessing various service options. Looking forward to 'automated service options' and 'driverless vehicles'... Go Google!!

END OF APPLICATION

## APPLICATION FOR WAAC MEMBERSHIP

### GENERAL INFORMATION

Name Regina Linse

Agency (if applicable) \_\_\_\_\_

Address 810 Chakeli Ct.

City Pleasanton Zip 94566

Home # ~~926-3212~~ Work # \_\_\_\_\_ Mobile # 989-6823

Email address: Rrlinse@comcast.net

**Which of the following open positions are you applying for?**  
(May check more than one, if applicable.)

City of Dublin	_____
City of Pleasanton	<u>✓</u>
City of Livermore	_____
Alameda County	_____
Social Services Agency	_____

**You are eligible for your position because you are**

**A resident of the City or County and are**

Elderly	_____
Disabled	<u>yes</u>
A Caretaker for a Disabled person	_____

**Or**

Employed in Social Services in the Tri Valley \_\_\_\_\_

1. Do you or your clients use Dial-A-Ride? If yes, how often? *I used to use Dial-A-Ride, but am not currently using it*

2. Do you or your clients use Fixed Route service? If yes, how often? *No*

3. In a single statement, why do you want to be on this committee? *I am interested in being on the committee because I feel that the ADA riders should be represented more clearly.*

4. What skills and knowledge do you feel you bring to this committee? *I am currently on the Pleasanton Paratransit Task Force as well as a volunteer with the Pleasanton Senior Center*

5. Will you be able to attend meetings during regular business hours? How flexible is your schedule?

*My schedule is very flexible as my current "job" is volunteering.*

6. Please include any additional information that may assist the decision making process.

*I enjoy helping in many capacities when I can!*





Livermore Amador Valley Transit Authority  
Wheels Accessible Advisory Committee (WAAC)

Application  
Page 1 of 2

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Livermore Amador Valley  
Transit Authority

## APPLICATION FOR WAAC MEMBERSHIP

### GENERAL INFORMATION

Name Jennifer Cullen  
Agency (if applicable) Senior Support Program of the  
Address 5353 Sunol Blvd Tri Valley  
City Pleasanton Zip 94566  
Home # N/A Work # 931-5387 Mobile # 997-1327  
Email address: j.cullen@ssptv.org

Which of the following open positions are you applying for?  
(May check more than one, if applicable.)

City of Dublin	_____
City of Pleasanton	_____
City of Livermore	_____
Alameda County	_____
Social Services Agency	<input checked="" type="checkbox"/> _____

You are eligible for your position because you are

A resident of the City or County and are

Elderly	_____
Disabled	_____
A Caretaker for a Disabled person	_____

Or

Employed in Social Services in the Tri Valley ☒ \_\_\_\_\_

Livermore Amador Valley Transit Authority  
Wheels Accessible Advisory Committee (WAAC)

Application  
Page 2 of 2

1. Do you or your clients use Dial-A-Ride? If yes, how often?  
My clients use Dial-A-Ride  
for in-town trips for medical appts, etc.

2. Do you or your clients use Fixed Route service? If yes, how often?  
My clients do not use The bus.

3. In a single statement, why do you want to be on this committee?  
As a direct service provider, I  
understand the needs of the elder  
adult population in the Tri Valley.

4. What skills and knowledge do you feel you bring to this committee?  
I am an advocate for seniors  
and can assist WAAC with ideas  
for providing excellent transportation

5. Will you be able to attend meetings during regular business hours? How  
flexible is your schedule?

I create my own schedule & can  
be flexible.

6. Please include any additional information that may assist the decision  
making process.

I am on Pleasanton  
Paratransit Task Force & have served  
on WAAC for  
several years.

END OF APPLICATION

## APPLICATION FOR WAAC MEMBERSHIP

### GENERAL INFORMATION

Name Pam Deaton, Recreation Supervisor

Agency (if applicable) City of Pleasanton Paratransit Services

Address 5353 Sund Blvd.

City Pleasanton Zip 94566  
(925) (925)

Home # \_\_\_\_\_ Work # 931-5367 Mobile # 202-7337

Email address: pdeaton@cityofpleasantonca.gov

**Which of the following open positions are you applying for?**  
(May check more than one, if applicable.)

City of Dublin	_____
City of Pleasanton	_____
City of Livermore	_____
Alameda County	_____
Social Services Agency	<u>X</u>

**You are eligible for your position because you are**

**A resident of the City or County and are**

Elderly	_____
Disabled	_____
A Caretaker for a Disabled person	_____

**Or**

Employed in Social Services in the Tri Valley X

1. Do you or your clients use Dial-A-Ride? If yes, how often?

yes, City of Pleasanton Seniors and RADD (Recreation for Adults with Disabilities Program) regularly use Dial-A-Ride services.

2. Do you or your clients use Fixed Route service? If yes, how often?

yes, Pleasanton seniors and RADD participants regularly use fixed route services.

3. In a single statement, why do you want to be on this committee?

Many of the people I serve through Pleasanton Senior Center, Pleasanton Paratransit Services and RADD use LAVTA's transportation services, so I would like to serve as an advocate for their needs & concerns.

4. What skills and knowledge do you feel you bring to this committee?

I have worked for over 33 years with seniors in assisting them with their needs, which includes transportation services. During the past 19 years, I have actively been involved at the County and local level in providing paratransit services to Pleasanton and Sunol residents.

5. Will you be able to attend meetings during regular business hours? How flexible is your schedule?

yes, I can attend regular meetings and can be somewhat flexible with my schedule.

6. Please include any additional information that may assist the decision making process.

I have served on WAAC for several years and enjoy the opportunity to share ideas & provide feedback on policy and procedures.



## APPLICATION FOR WAAC MEMBERSHIP

### GENERAL INFORMATION

Name Amy Mauldin  
Agency (if applicable) Social Service agency (RCFB)  
Address 3937 Duke Way  
City Livermore Zip 94550  
Home # 925 454 0698 Work # 510-618-6187 Mobile # 925 640-9440  
Email address: ~~amymauldin@rcfb.org~~ amauldin@RCFB.ORG

**Which of the following open positions are you applying for?**  
(May check more than one, if applicable.)

City of Dublin	_____
City of Pleasanton	_____
City of Livermore	_____
Alameda County	_____
Social Services Agency	<u>X</u>

**You are eligible for your position because you are**

**A resident of the City or County and are**

Elderly	_____
Disabled	_____
A Caretaker for a Disabled person	_____

**Or**

Employed in Social Services in the Tri Valley X

1. Do you or your clients use Dial-A-Ride? If yes, how often?

yes

2. Do you or your clients use Fixed Route service? If yes, how often?

yes

3. In a single statement, why do you want to be on this committee?

TO keep current with transportation  
in the disabled community

4. What skills and knowledge do you feel you bring to this committee?

Past job as travel trainer, and  
working in the disabled community

5. Will you be able to attend meetings during regular business hours? How flexible is your schedule?

yes

6. Please include any additional information that may assist the decision making process.

Past representative

Livermore Amador Valley Transit Authority  
Wheels Accessible Advisory Committee (WAAC)

Application  
Page 1 of 2

## APPLICATION FOR WAAC MEMBERSHIP

### GENERAL INFORMATION

Name HERB HASTINGS  
 Agency (if applicable) REGIONAL CENTER  
 Address 5300 FORT HORSE PARKWAY 154  
 City DUBLIN Zip \_\_\_\_\_  
 Home # 925 949 9304 Work # 510 618 6148 Mobile # 925 337 1738  
 Email address: HASTINGS RCEB ORG  
COMCAST NET

Which of the following open positions are you applying for?  
(May check more than one, if applicable.)

City of Dublin \_\_\_\_\_

City of Pleasanton \_\_\_\_\_

City of Livermore \_\_\_\_\_

Alameda County X CURRENT

Social Services Agency \_\_\_\_\_

You are eligible for your position because you are

A resident of the City or County and are

Elderly \_\_\_\_\_

Disabled X

A Caretaker for a Disabled person \_\_\_\_\_

Or

Employed in Social Services in the Tri Valley \_\_\_\_\_

Livermore Amador Valley Transit Authority  
Wheels Accessible Advisory Committee (WAAC)

Application  
Page 2 of 2

1. Do you or your clients use Dial-A-Ride? If yes, how often?

YES, AS NEEDED

2. Do you or your clients use Fixed Route service? If yes, how often?

YES

3. In a single statement, why do you want to be on this committee?

TO ASSIST TO IMPROVE  
TRANSIT SERVICE FOR  
EVERYONE

4. What skills and knowledge do you feel you bring to this committee?

ADVOCACY TO HELP  
DISABLED COMMUNITY

5. Will you be able to attend meetings during regular business hours? How flexible is your schedule?

YES

6. Please include any additional information that may assist the decision making process.

CURRENT MEMBER  
17 YEARS  
MEMBER OF PAPLO, IWC

END OF APPLICATION