



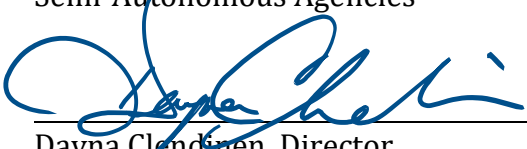
Dayna Clendinen
Director

DIVISION OF PERSONNEL

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MEMORANDUM

TO: Agency Heads of All Branches of Government and
Semi-Autonomous Agencies

FROM: 
Dayna Clendinen, Director

DATE: July 22, 2019

SUBJECT: **Vacancy Announcement - Employee/Retiree Representatives to the GESC Health Insurance Board of Trustees**

The Division of Personnel is in the process of conducting elections for the employee and retiree representatives to the Government Employees Service Commission (GESC) Health Insurance Board of Trustees. Title 3, Chapter 1, Section 6(b) requires that two employees of the Government of the Virgin Islands (one from each District), be democratically chosen by other Government employees to be appointed to the GESC Health Insurance Board. Title 3, Chapter 1, Section 6(b) further requires that two retirees of the Government of the Virgin Islands (one from each District), be democratically chosen by other retirees of the Government of the Virgin Islands to be appointed to the GESC Health Insurance Board.

I am requesting that you encourage your employees to participate in this process. Employees interested in serving on the Board, must complete and submit the GESC Health Insurance Board of Trustees Candidate Profile Form to the Division of Personnel in either District, no later than, **Thursday, August 8, 2019**. The form can be picked up from the Division's offices or downloaded from the 'Documents & Forms' 'Health Insurance' page on the Division's website.

Your cooperation and participation in the process to is greatly appreciated. If you have any questions or concerns, please contact Valerie P. Daley, Chief, Group Health Insurance at (340) 774-8588 extension 5144.

cc: All HR Officers



GESC Health Insurance Board of Trustees Candidate Profile Form

(Please Print)



Complete and submit this form – along with a 2”x2” head shot picture (.jpeg) of yourself – to damali.rogers@dop.vi.gov no later than, **Thursday, August 8, 2019.**

Name: _____ **Dept.:** _____

Title: _____ **District:** St. Thomas/St. John St. Croix

Phone Number: _____ **E-mail:** _____

Education: _____ **Yr. of Service:** _____ **Union:** _____

Status: Active Fulltime Employee
Retiree

Experience: (State specifically what you can contribute as a member of the GESC Health Insurance Board of Trustees.)

Goals: (State the specific goals you would like to accomplish as a member of the GESC Health Insurance Board of Trustees.)

Interest: Why are you interested in being on the GESC Health Insurance Board of Trustees?

I hereby submit my name as a candidate in the 2019 election of Employee and Retiree Representatives to the Government Employees Service Commission (GESC) Health Insurance Board of Trustees of the Government of the United States Virgin Islands. I understand that I may choose not to include personal information such as address, phone number, email address, education and occupation in the profile. I specifically authorize the Division of Personnel to compile the information that I have provided above into a Candidate Profile for distribution to the employees of the Government.

Full Name: _____ Employee #: _____

Signature: _____ Date: _____

DOP USE ONLY

Date Received: _____ Received By: _____