Date:

December 4, 2018

To:

Ms. Rosemary Chiavetta, Secretary

From:

Sharon Behun, CI & CT

RECEIVED

2818 DEC -5 AM 10: 57

PA PUC

SECRETARY'S DUREAU

Re:

Application for PA Telecommunications Relay Service Advisory Board

I am interested in becoming a member of the Telecommunications Service Advisory Board.

I have been working with people who are deaf, deafblind, and hard of hearing in various capacities over the past twenty years in PA as an advocate, registered sign language interpreter, and former Director of the Labor & Industry's Office for the Deaf & Hard of Hearing. Currently, I am the Director of Program Development & Expansion at the Center for Independent Living of Central PA (CILCP) which allows me to expand my network of providers and key stakeholders into the disability community.

By being a member of the Board, I am able to:

- Act as a liaison between the Board and the community
- Work more closely with our PA Relay Outreach Coordinators. Most recently the CILCP hosted the PA Relay's annual town hall meeting
- Provide input to the Board from a provider or business perspective, as needed.
- Provide input and/or collaborate on education and outreach, which is a priority.

For additional information, please visit me on LinkedIn at <a href="https://www.linkedin.com/in/sharonbehun/">https://www.linkedin.com/in/sharonbehun/</a>, or contact me at <a href="mailto:sharonbehun@comcast.net">sharonbehun@comcast.net</a> or at 717-497-4054.

Thank you for your consideration.

## **Application Form** For

## Pennsylvania Telecommunications Relay Service Advisory Brand M-00900239

	2018 DEC -5 AM 10: 5/
Date of Application: October 2, 2018	PA: PUC
Provide the Following:	SECRETARY'S BUREAU
Name: Sharon Behon	
Address: 2741 North 4th St.	•
City: Harrisbury State: PA	Zip 17110 201
County of Residence. Duphin Phone Number:	(717) 497 - 4054 Phone / Lex
Email: Shaeonbehun @ Comcast. Net	ı
How would you identify yourself (please check one):	
Y Hearing D	eaf/Blind
Hard of Hearing S	peech Impaired
Deaf	
(By Order, at Docket No. M-00900239 entered May 29, 19	990 the TRS Board must consist of
members from hearing and speech impair	red communities.)
Have you ever used TRS Services (check which applies):	Yes No
If yes, please list any services you have used:	
Pa Captional telephon relay + Parelay.	
Have you read and understand the Board's By-Laws?	<b>Y</b> Yes No
Include the following information, on a separate sheet of pa	per, with this application and

please limit responses to a couple of sentences:

- Briefly describe why you are interested in joining this Board.
- Briefly describe your skills or experiences that match the purpose and responsibilities of the Board.
- Briefly describe what you expect to gain from being a member of this Board.
- Explain your involvement, describe the benefit the community you represent would gain from membership to this Board, and how you best represent the deaf, speech impaired, deaf blind or hard of hearing community.
- Please attach a copy of your resume and a letter of recommendation.

Mail your application packet to: Ms. Rosemary Chiavetta, Secretary, Pennsylvania Public Utility Commission, P.O. Box 3265, Harrisburg, PA 17105-3265.

Revised: 13 June 2013