

Thomas W. Sorenson

1123 W. 425 S.

Cedar City, UT 84720

760-793-4335

thomassorenson1990@gmail.com

Profile

- Vast knowledge and Familiarity with JAWS and various other Accessibility software for the Visually Impaired
- 10+ Years experience with Accessibility Technology
- Strong Skills in JAWS Scripting
- Work effectively both on teams and independently
- Extensive experience as Office Manager in Accessibility focused department
- Trained in Data Analysis and Finance
- Well organized and have a mind for efficiency and Operations Management
- Very strong computer and Administrative Skills
- Strong mind for innovation and Optimization

Professional Experience

- Experience developing and overseeing project's for University Departments
- Experience managing, overseeing, and documenting multiple projects simultaneously for University level educational programs
- Experience planning and leading team operations
- Experience using Microsoft Office and various other software for Office Solutions including programming custom programs to optimize tasks

Administrative Assistant/Office Manager – Southern Utah University (8/18-Current)

Business Law Teacher's Assistant – Southern Utah University (8/16-Current)

Social Media Manager - Southern Utah University (8/11 – 5/12)

Education

Bachelor of Science - Finance- Southern Utah University (2018)

- Gained skills in forecasting, Valuation, Accounting, Budgeting and Investment
- Gained knowledge in Corporate finance, Investment theory, Risk Management, and Asset Valuation.

Bachelor of Science - Economics - Southern Utah University (2018)

- Gained skills in Data Analysis, Decision Modelling, and reporting complex data
- Gained knowledge in Supply/Demand Theory, Price Theory, and Econometrics.



168 N. 100 E., Suite 101
St George, Utah 84770
(435) 673-7501

RRCI BOARD OF DIRECTORS APPLICATION

If and when there is a vacancy on the Red Rock Center for Independence Board of Directors, I would like to be considered. I would be committed to the support and advancement of the organization's mission.

Please attach your resume.

Please type or print:

Name: Thomas Sorenson

Address: 4236 W 300N

City/State/Zip: Cedar City, UT 84720

Telephone: 435-793-4835 Fax: 435-865-8023

Email: Thomassorenson@suu.edu

Which Best Describes You/Your Areas of Interest: Check all that apply

- | | |
|--|--|
| <input checked="" type="checkbox"/> Person with a Disability | <input checked="" type="checkbox"/> Service Provider |
| <input type="checkbox"/> Family w/Disability | <input type="checkbox"/> Activities for People with Disabilities |
| <input type="checkbox"/> Child | <input type="checkbox"/> Advocate |
| <input type="checkbox"/> Sibling | <input checked="" type="checkbox"/> Financial |
| <input type="checkbox"/> Parent | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Friend with a disability | <input type="checkbox"/> Legal |

How much time would you be able to commit to board activities?

4 to 6 hours/month 7 to 9 hours/month 10 or more hours/month

The board would like its membership to provide cross-disability representation. Are you a person with a disability?

Yes No

If yes, what is your disability? (This information will remain confidential.)

Legally Blind, LCHAD

What qualifications/experience/special qualities or skills do you have that would make you an effective member of the board?

I have first hand experience with disability resources. I currently work as one of two Disability Support Specialist at SUU.

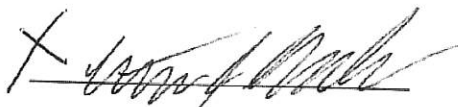
I have a double Bachelor's degree in Finance & economics.

I am currently working on my Masters of Business Analytics.

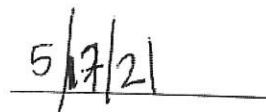
Add any additional information including prior volunteer experience you would like the board to know about you.

I used to volunteer for youth groups and any SUU representation in the region for students with disabilities.

I have reviewed the Red Rock Center for Independence Board Member Contract, and will complete that agreement if this application is accepted.



Signature



Date



BOARD OF DIRECTORS CONFLICT OF INTEREST
DISCLOSURE FORM

Date: May 17, 2021

Name: Thomas Sorenson

Position: Board Member

Conflict of interest is defined as a significant financial or other interest that could compromise or bias professional judgment and objectivity related to the management of RRCI (See RRCI Board By-Laws, Article IV: Board of Directors, Section 7)

Please describe below any relationships, transactions, positions you hold, or circumstances that you believe could contribute to an actual or potential Conflict of Interest between RRCI and your personal interests, financial or otherwise:

X I have no Conflict of Interest to report. I do not provide any services from an agency affiliate, employee, outside agency, vendor, etc., that personally benefits me or a Family Member.

_____ I have the following conflicts of interest to report. I receive or provide services for an agency affiliate, employee, outside agency, vendor, etc., that personally benefits me or Family Member:

1. _____
2. _____
3. _____
4. _____

I hereby certify that the information set forth above is true and complete to the best of my knowledge. I have received, read, understand, and agree to abide by RRCI's Conflict of Interest Policy.

X Thomas Sorenson
Signature

5/17/21
Date