

### Office of the Governor United States Virgin Islands

# OUESTIONNAIRE FOR COVERNOR'S NOMINEE FOR DEPARTMENTS, AGENCIES, BOARDS & COMMISSIONS

## PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE YOU COMPLETE THIS QUESTIONNAIRE.

- 1) <u>ALL</u> questions must be fully and correctly answered and returned to the Office of Legal Counsel within seven (7) business days of your receipt of the Questionnaire.
- 2) Do not submit a resume instead of this Questionnaire.
- 3) If more than the allotted space on this form is required for a complete and full answer, please attach as many additional 8½ x 11 sheets as may be needed. At the top of each additional sheet put your name, "Office of the Governor, Office of Legal Counsel", and then reference the question number before each answer.
- 4) The Questionnaire is in PDF Format. Please complete all responses clearly in black font color. Responses are <u>NOT</u> to be handwritten.
- Please do not hesitate to call the Office of Legal Counsel at Government House at (340) 774-0001 if you have any questions concerning this Questionnaire.

#### Office of the Governor Questionnaire for Nominees to Departments, Agencies, Boards & Commissions 2 | P a g e

NOMINEE'S NAME:

#### SECTION I: BIOGRAPHICAL DATA

1. NAME: (Last)	(Firs	it)	(Middle)	(Other)
	Gu	adalupe-Perez, Elizabeth		
2. SOCIAL SECURITY				
3. ADDRESS:	L	Kingshill VI	00851	
Mailing:		dingariii vi	00001	3885 - A
Residential:	Frederiksted, V	00840		
Business:	Frederiksted, VI 00	840		
E-Mail:	: : : : : : : : : : : : : : : : : :			
Phone Number(s) -		(Cell) No	ne	(Home)
4. Length of Residence	in the Virgin Islan	nds: 50 years		19070
5. Date of Birth:			901	
6. Place of Birth: St. Cn	olx, U.S. Virgin Islands			
7. Marital Status:	× Married	Single	Widowed	_Divorced
8. Full Name of Spouse	<b>:</b>			
Mailing & Residential	Address:	Kingshill, VI 00851		
Business, Name & Add	ress: N/A			
		9. EDUCATION		
Institution	Dates Attended	Degree Received	Date Received	Certifications
St. Croix Central High School	1989 - 1992	High School Diploma	1992	Business/Accounting
University of the V.I.	2018	Bachelors of Art	Pending	Accounting
1 200 000 000	87.2			
	79-50-010			489.34
				SOUTH 4000 N

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#### NOMINEE'S NAME:

10. EMPLOYMENT RECORD: Please list, in chronological order, your complete employment record for the past ten (10) years, beginning with the present or most recent position.

[Attach additional sheet(s), if necessary, and reference this question number]

Employer	Dates of Employment	Position	Address/Phone #	Supervisor
Self-Employed Elizabeth Guadalupe-Perez	2006 - Present	Certified Res. Real Estate Appraiser		None

#### 11. GOVERNMENT EXPERIENCE:

A. List all federal, state, territorial or local government services, giving dates and type of service such as employee, boards, commissions, executive, legislative or judicial branches, consultant, voluntary service, part-time or honorary. [Attach additional sheet(s), if necessary, and reference this question number]

B. List and attach a copy of all service contracts you have held independently or been a party to with the Government of the Virgin Islands.

N/A					
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I.3. QUALIFICATIONS: What in your opinion qualifies you to serve the People of the Virgin Islands in the position which the Governor has nominated you?  I'm committed. I enjoy mentoring and sharing my knowledge with others.  I have strong ethics and I dedicate to always put forth my best efforts in anything I have to do. I have developed strong leadership skills throughout my career and as a minister which I can apply to serve the People of the Virgin Islands.  SECTION II: HONORS AND ACCOMPLISHMENTS  14. MEMBERSHIPS: List all memberships and offices held in professional, fraternal, scholarly, civic, charitable, and other organizations.  Co-Pastor/Missionary - La Iglesia de Dios de Santa Cruz, Inc.	N/A	
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N/A	trusts, or fiduciary respo	onsible positions on which you have served or are now serving.
N/A		
	N/A	

**16. HONORS AND AWARDS:** List all scholarships, fellowships, honorary degrees, honor society memberships, and any other special recognition for outstanding service or achievement.

Office of the Governor

Questionnaire for Nominees to Departments, Agencies, Boards & Commissions

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N/	A
	PUBLISHED WRITINGS: List all titles, publishers and dates of books, articles, reports, or r published materials you have written.
N/	A
	SECTION III: CHARACTER
18.	Have you ever been the subject of a grand jury, police, and department of justice or any legally constituted government authority, investigation anywhere or at anytime? YES X_NO
	If your answer is yes, please explain with details including date and location. [Attach additional sheet(s), if necessary, and reference this question number]
19.	Have you ever been arrested in any geographical location for any offense, including traffic violations?YES _XNO
	If yes, please explain with details including offense, date of location and disposition. [Attach additional sheet(s), if necessary, and reference this question number]
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#### NOMINEE'S NAME:

	, please explain in detail, giving date, venue, agency, and the names of the other parties and the sition. [Attach additional sheet(s), if necessary, and reference this question number]
23.	Have you ever been <u>named as a party</u> in any hearing, administrative, civil, and criminal, including Equal Employment Opportunity or sexual harassment?YES _X_NO
	If the answer is yes, please explain with details on date, location and disposition or current status. [Attach additional sheet(s), if necessary, and reference this question number]
22.	Have you ever been a respondent in any labor dispute or discrimination proceeding? YES _XNO
	status. [Attach additional sheet(s), if necessary, and reference this question number]
21.	Is there now or has there ever been a judgment entered against you? YES X NO If the answer is yes, please explain with details on date, location and disposition or current
-	
	additional sheet(s), if necessary, and reference this question number]
20.	Have you ever been convicted of a felony or a misdemeanor?YES _X_NO If yes, please explain with details including offense, date, location, and current status. [Attach

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NOM	INEE'S NAME:
<u> </u>	
24.	Have you now or have you ever been a member of an organization or an associate of an individual advocating terrorism, overthrow of a government by force or the advocacy or subordination of any ethnic group or individuals? YESXNO
	If the answer is yes, please give details of dates, names of organizations, names of individuals and all pertinent circumstances. [Attach additional sheet(s), if necessary, and reference this question number]
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7.77	
25.	Do you know of any individual, organization or group, which can be expected to oppose your nomination? YES X NO
	e answer is yes, please list the individuals, organizations or groups by name and give the details of belief for their opposition. [Attach additional sheet(s), if necessary, and reference this question ber]
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26. Do you have any outstanding and delinquent monetary obligations to the Government of the Virgin Islands or any other public or private entity, including but not limited to, personal income taxes, business taxes, real property taxes (commercial or residential), business license renewals, trade name renewals, annual reporting fees, professional organization dues, child support, judgments, debt

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#### NOMINEE'S NAME:

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e to remove yourself from any possible conflict. (Attach additional sheet(s), if necessary.)
SECTION V: JOB PERFORMANCE
term goals commit time and make myself available to the board. I will learn the rules and
ations to follow. I will enhance my professional skills by completing any required course
assist in any pending project.
term goals
apply and commit with my short-term goals to achieve the purpose, vision, and
ose of this entity.
Is there any additional information that you believe would assist the Committee on Rules ar diciary in processing your nomination expeditiously?
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NOMINEE'S NAME:

#### CERTIFICATION:

This is to certify and affirm that all the statements contained herein and in any supporting documents or schedules or other such supporting documents or schedules executed at a later date as a part or addendum to this document are true and correct to the best of my knowledge and are made in good faith.

Signed thisday of20 24/ Elizabeth Guadalupe-Perez	ES wadely very
Nominee's Name [Print Clearly]	Signature of Nominee
Sworn and subscribed before me this	day of November 2024
Notary Pyblic of the U.S. Virgin Islands	[seal]
My commission expires: Oct 1120%	26
•	SINDEY B. WILTON Notary Public St. Croix, U.S. Virgin Islands NP-554-22 My Commission Expires October 11, 2026