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UFISINAN I MAGA'HÅGA
OFFICE OF THE GOVERNOR

LOURDES A. LEON GUERRERO
MAGA'HÅGA · GOVERNOR

JOSHUA F. TENORIO
SIGUNDO MAGA'LÅHI · LIEUTENANT GOVERNOR

35GL-19-1305
Speaker Tina Rose Muña Barnes

DEC 04 2019
Time 12:46 ( )AM (X)PM
Received By:

November 29, 2019

Honorable Tina Rose Muña Barnes
Speaker
*I Mina'trentai Singko Na Liheslaturan Guåhan*
Guam Congress Building
163 Chalan Santo Papa
Hagatna, Guam 96932

2019 DEC -4 PM 1:58

**RE: Board Appointment**

Dear Madame Speaker:

By virtue of the authority vested in me pursuant to the Organic Act of Guam and the local laws applicable to the following position, I am pleased to transmit the following appointment and supporting documents for:

| | |
|---|---|
| APPOINTEE: | Nadine T. Cepeda |
| POSITION: | Member, (Marriage & Family Therapist Representative)<br>Guam Board of Allied Health Examiners |
| TERM LENGTH: | **Three (3) Years; December 2, 2019 to December 1, 2022** |

The appointment is subject to the consent of *I Liheslaturan Guåhan*. Please schedule a hearing at your earliest convenience.

*Senseramente,*

**LOURDES A. LEON GUERRERO**
*I Maga'hågan Guåhan*
Governor of Guam

cc: Lt. Governor of Guam

RICARDO J. BORDALLO GOVERNOR'S COMPLEX · HAGÅTÑA, GUAM 96910
P.O. BOX 2950 · HAGÅTÑA, GUAM 96932
671.472.8931 · 671.472.8932/6

1305

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UFISINAN I MAGA'HÅGA
OFFICE OF THE GOVERNOR

LOURDES A. LEON GUERRERO
MAGA'HÅGA • GOVERNOR

JOSHUA F. TENORIO
SIGUNDO MAGA'LÅHI • LIEUTENANT GOVERNOR

November 29, 2019

Nadine T. Cepeda
[redacted]

Dear Ms. Cepeda:

Pursuant to my authority under 10 GCA § 12803, I am reappointing you to serve as a

**MEMBER, GUAM BOARD OF ALLIED HEALTH EXAMINERS**
**Marriage & Family Therapist - Representative**
**Term Length: Three (3) Years; December 2, 2019 to December 1, 2022**

Your reappointment is a testimony to your commitment to service and the understanding of the great responsibility that this position requires and I know that you will continue to fulfill your duties in a professional manner for others to follow.

I appreciate your willingness to serve in this position, and I am confident that your time on the Board will be effective and productive.

As you are aware, this appointment is subject to the advice and consent of *I Liheslaturan Guahån*. If you have any questions or concerns, please contact Michael Weakley of the Governor's Office at 475-9477.

*Senseramente,*

**LOURDES A. LEON GUERRERO**
*I Maga'hågan Guåhan*
Governor of Guam

cc: Lt. Governor of Guam
Chairperson, GBAHE
Administrator, HPLO-EMS

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LOURDES A. LEON GUERRERO
*Governor*

JOSHUA F. TENORIO
*Lieutenant Governor*

# OFFICE OF THE GOVERNOR OF GUAM
## Nomination and Appointment Information Sheet

The following information is required for submission to the
Speaker of *I Liheslaturan Guåhan* in accordance with Title 4, Guam Code Annotated Section 2103

### NOMINEE INFORMATION

| ***Last Name*** | ***First Name*** | ***Middle Initial*** |
|---|---|---|
| CEPEDA | NADINE | T |
| ***Mailing Address*** [redacted] | | ***Apartment/Unit #*** |
| ***City*** [redacted] | ***State*** [redacted] | ***Zip Code*** [redacted] |
| ***Phone*** [redacted] | ***E-mail Address*** [redacted] | |
| ***Position to which Appointment is Made*** Member, Guam Board of Allied Health Examiners | | |
| ***Are you a citizen of the United States?*** | **Yes** ☑ | **No** ☐ |
| **If no, are you authorized to work in the United States?** | **Yes** ☐ | **No** ☐ |

### EDUCATION

| ***SCHOOL (Name, City and State)*** | ***DATES OF ATTENDANCE*** | ***TYPE OF DEGREE*** | ***YEAR EARNED*** |
|---|---|---|---|
| ***High School*** ND High Schoo, Talofofo, Guam | 1990 - 1993 | High School Diploma | 1993 |
| ***College*** California State University, Sacramento, CA | 1995 -1999 | BA | 1999 |
| ***Graduate School*** California State University-Northridge, CA | 2006-2007 | MA | 2007 |
| ***Other Degree*** University of Guam | 2008 - 2010 | MA | 2010 |

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## EMPLOYMENT HISTORY

| ***Name of Present/Last Employer and Mailing Address*** | ***Position Title*** |
|---|---|
| Department of Education<br>Government of Guam | District School Pshychologist |
| | ***Dates Held*** |
| | 10/2015 - Present |

| ***Previous Employer and Mailing Address*** | ***Position Title*** |
|---|---|
| Judiciary of Guam<br>Client Services and Family Counseling<br>Government of Guam | Judiciary Therapist |
| | ***Dates Held*** |
| | 10/2014 - 10/2015 |

| ***Previous Employer and Mailing Address*** | ***Position Title*** |
|---|---|
| Guam Behavioral Health & Wellness Center<br>Government of Guam | Psychiatric SW Supervisor/PSW II |
| | ***Dates Held*** |
| | 3/2001 - 10/2014 |

| ***Previous Employer and Mailing Address*** | ***Position Title*** |
|---|---|
| Cornerstone Counseling & Wellness Center<br>Hagatna, Guam | Private Practice |
| | ***Dates Held*** |
| | 6/2010 - Present |

| ***Previous Employer and Mailing Address*** | ***Position Title*** |
|---|---|
| | ***Dates Held*** |

## PRIOR GOVERNMENT OF GUAM SERVICE

| ***Agency or Department Name*** | | ***Position Title*** |
|---|---|---|
| ***Address*** | ***Phone No.*** | ***Dates Held*** |

| ***Agency or Department Name*** | | ***Position Title*** |
|---|---|---|
| ***Address*** | ***Phone No.*** | ***Dates Held*** |

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## PRIOR GOVERNMENT SERVICE (EXCLUDING GOVERNMENT OF GUAM)

| ***Agency or Department Name*** | | ***Position Title*** |
|---|---|---|
| ***Address*** | ***Phone No.*** | ***Dates Held*** |

| ***Agency or Department Name*** | | ***Position Title*** |
|---|---|---|
| ***Address*** | ***Phone No.*** | ***Dates Held*** |

## TRAINING

| ***INSTITUTE/SEMINARS/ON-THE-JOB TRAINING*** | ***DATE*** |
|---|---|
| Play Therapy Conferences | 2016 - 2018 |
| American Psychological Association Conferences | 2014/15 & 2017 - 2019 |
| Association of Marriage, Family Therapist Regulatory BD Conf | 2019 |
| | |

## AWARDS

| ***List all educational, professional, civic awards, and recognition for public service:*** |
|---|
| System of Care Award, 2018 |

## PROFESSIONAL INVOLVEMENT

| ***List involvement on a local/national/international level. List organizations, activities participated in, and offices held:*** |
|---|
| Member & Past Officer, Guam Assoc. of Indiv Marriage and Family Therapist (AIMFT), 2010 - Present<br>Associate Memebr, Guam Psychological Association, 2014<br>Member, Guam Medical Association, 2015<br>Vice-Chair, Guam Coalition Against Sexual Assault and Family Violence, 2016 - 2019 |

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## COMMUNITY / CIVIC INVOLVEMENT

| ***List organizations, activities participated in, and offices held:*** |
|---|
| Member, BD of Directors, Guam Legal Services, 2019<br>Member, Protection and Advocacy for Individuals w/Mental Illness Council, 2014 - 2016 |

## PUBLICATIONS AND PRESENTATIONS

| ***List any published articles, papers delivered at professional meetings, etc.:*** |
|---|
| Numerous presentations at local, NASW & AIMFT conferences |

## MILITARY SERVICE (Please attach Form DD-214)

| *BRANCH* | *DATES OF SERVICE* | *RANK AT DISCHARGE* | *TYPE OF DISCHARGE* |
|---|---|---|---|
| | | | |

## OTHER INFORMATION

**(1) Have you ever been found guilty of a felony in any court, whether within or without the United States?**

**Yes** ☐ **No** ☑ **If so, please specify in detail:** _____

**Address of the Court:** _____

**Date(s) of Conviction:** _____

**Specific Infraction Committed:** _____

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**(2) Have you ever been declared mentally incompetent by any court, whether within or without the United States?**

**Yes ☐ No ☑ If so, please specify in detail the reasons and facts related to such declaration:**

_____

_____

_____

_____

_____

**(3) Have you ever been found not guilty or not punishable in any criminal proceedings by reason of insanity?**

**Yes ☐ No ☑**

**(4) Have you ever been confined to a mental institution for any reason?**

**Yes ☐ No ☑ If so, please specify in why the appointing authority believes you that you are not suffering from any mental illness or affliction:**

_____

_____

_____

_____

_____

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**LOURDES A. LEON GUERRERO**
*Governor*

**JOSHUA F. TENORIO**
*Lieutenant Governor*

## OFFICE OF THE GOVERNOR OF GUAM

# Statement of Financial Interests

(Required by 4 G.C.A. §13104.1)

TO: The Honorable Lourdes A. Leon Guerrero
Governor of Guam
Ricardo J. Bordallo Governor's Complex
Adelup, Guam 96910

FROM: Nadine T.Cepeda

☑ I have no financial interest in any business

☐ I do have interest(s) in the following business(es):

| NAME AND ADDRESS OF BUSINESS INTEREST | TYPE AND AMOUNT OF INTEREST |
|---|---|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

Signature

11/20/19
Date

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## AFFIDAVIT / DECLARATION UNDER PENALTY OF PERJURY

I, the undersigned, do hereby depose and say that: (1) I have read and reviewed the information contained in the attached Appointment/Nomination letter from the Governor of Guam; (2) that the matters contained in the Appointment/Nomination letter, together with all attachments thereto, are true and correct and that I am competent to testify to said matters; and (3) that this Declaration is made for the purpose of complying with the requirements of 4 G.C.A. Section 2103.5.

I declare under penalty of perjury under the laws of Guam (4 G.C.A. Section 4308) that the foregoing is true and correct.

Nadine T. Cepeda — Print Name and Signature

11/20/19 — Date

Note that the Legislature has taken steps to ensure that any protected personal identifying information has been redacted or excluded in whole or in part in order to protect the privacy of any individual(s) whose information has been included as part of this transmittal.


# SUPERIOR COURT OF GUAM

Guam Judicial Center • 120 West O'Brien Drive • Hagatña, Guam 96910

Telephone (671) 475-3370/475-3449
Fax (671) 472-2856

**DANIELLE T. ROSETE**
Clerk of Court


Name: NADINE T CEPEDA

SS#: ID# [redacted] Date of Birth: [redacted]

## CERTIFICATE OF SEARCH

The undersigned Clerk hereby certifies the following results of a diligent search of the records of this Court:

**Criminal Cases:**

A. [X] No Case Found

B. 1. Criminal Case No.
2. Criminal Case No.
3. Criminal Case No.
4. Criminal Case No.
5. Criminal Case No.

Criminal Record: Page 1 of 1

**Civil Cases:**

A. [ ] No Case Found

B. 1. Civil Case No.
2. Civil Case No.
3. Civil Case No.
4. Civil Case No.
5. Civil Case No.

Civil Record: Page 1 of 1

Request for further information may be addressed at the Records Division of the Superior Court of Guam, Guam Judicial Center, 120 West O'Brien Drive, Hagatña, Guam. Hours of operation are Monday – Friday, 8:00 a.m. to 5:00 p.m. Closed Saturday, Sunday and local/federal holidays. Court Clearances are Non-Refundable.

**Dated:** 11/22/2019

**DANIELLE T. ROSETE**
**Clerk of Court**

**BY:** ALAN N PAULINO
**Deputy Clerk**

**Prepared By:** anp

The absence of an original Court Seal invalidates this document

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Government of Guam
GUAM POLICE DEPARTMENT
RECORDS & IDENTIFICATION SECTION
P.O. Box 23909
Guam Main Facility, Guam 96921

November 22, 2019

**SUBJECT: CRIMINAL HISTORY RECORD**

| | | | |
|---|---|---|---|
| **NAME:** | **Nadine T CEPEDA** | | |
| **DATE OF BIRTH:** | [redacted] | **FINGERPRINT#:** | **N/A** |
| ■ | **The individual has no record of criminal conviction(s) in the Guam Police Department files that are subject to Guam law.** | | |

*******************NOTHING FOLLOWS*******************

*THIS INFORMATION MAY BE LIMITED TO A LOCAL CRIMINAL OFFENSE ONLY AND IS NOT INTENDED FOR USE FOR ANY LOCAL, STATE, OR FEDERAL LAW ENFORCEMENT AGENCY.*

**By Direction: roque**

**STEPHEN C. IGNACIO**
**Chief of Police**

**The absence of an original GUAM POLICE seal invalidates this police clearance.**
REVISED 04/26/19