

From: noreply@civicplus.com
To: [City Clerk Department](#)
Subject: Online Form Submittal: Citizen Board/Committee Application
Date: Thursday, August 14, 2025 6:08:36 PM

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Citizen Board/Committee Application

Contact Information

Applications remain on file for **6 months only**.

Choose from the following	Ordinance Review Committee
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Name	Matthew Borgens
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Email Address	Matbor2030@hotmail.com
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Organization	<i>Field not completed.</i>
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Address	1665 gold oaks rd
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City	Deltona
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State	Florida
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Zip Code	32723
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Phone Number	407 219 0341
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Fax Number	<i>Field not completed.</i>
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About Yourself

Number of Years as a Deltona Resident	21 to 25 Years
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What Commission district do you reside in?	District 4
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Are you a registered voter in Volusia	Yes
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County?

Who is your employer? (Please include number of years, address, phone number and title / position)	Presidio Software operations specialist 3 years Remote
Please summarize your work experience.	I have 15 year working at AdventHealth as a Security Manager writing policies. I worked with AdventHealth on the transition of the ISO9001 process as part of their standardization process on policies. Before that I worked at MHB trucking where I helped track and align their IT system and standards. After leaving AdventHealth i went to to school for IT and as I was doing that I was a Security manager for different contract agencies from banks to communities writing Security policies to aide their perimeter hardening and security assessment. Over my career I have 20 years of policy writing and that now ties into my cybersecurity degree and work where I have assisted in IT audits for HIPAA and PII compliance.
List any volunteer service organizations, clubs, or professional societies you are a member of and give the positions or titles you have held.	I was the president of my HOA I have been a part of the Deltona University I was an active participant in our local disaster planning with the hospital both in Volusia and at Seminole County.
Describe any additional knowledge, skill, education, or experience you have, which would assist you in the duties of this Board/Committee.	HIPAA PII ISO9001 NIST Roberts rules Sat on boards and chaired committees within the hospital. Grassroots leadership development at AdventHealth.
Explain why you want to serve on this Board/Committee, and include any potential contribution you selection would bring.	To assist in growing the community and leading the city to a better tomorrow.
Potential Conflict of Interest	Working with Doc, Commissioner Dori and Commissioner Harrison on prior concerns or the within the city.
Have you ever been	No

convicted for violation of any federal, state, county, or municipal law, regulation, or ordinance? If so, give details. Do not include traffic violations or fines of \$100 or less that were imposed, unless it also included a jail sentence.

List names, addresses, and telephone numbers of at least three persons who are in a position to comment on your qualifications and of whom inquiry may be made by the City of Deltona.

Can give at a later time need to contact and ask permission to give out their information first.

Additional Information or Comments

Field not completed.

Email not displaying correctly? [View it in your browser.](#)