From: noreply@civicplus.com
To: City Clerk Department

Subject: Online Form Submittal: Citizen Board/Committee Application

Date: Thursday, August 14, 2025 6:49:44 PM

This Message Is From an External Sender

This message came from outside your organization.

Citizen Board/Committee Application

Contact Information

Applications remain on file for 6 months only.

Choose from the following	Ordinance Review Committee, William S. Harvey Scholarship Selection Committee
Name	Darlene Oquendo
Email Address	darlene9376@gmail.com
Organization	Field not completed.
Address	2931 Keesler St
City	Deltona
State	FL
Zip Code	32738
Phone Number	3865647756
Fax Number	Field not completed.
About Yourself	
Number of Years as a Deltona Resident	6 to 10 Years
What Commission district do you reside in?	District 1
Are you a registered voter in Volusia	Yes

County?

County?	
Who is your employer? (Please include number of years, address, phone number and title / position)	Currently working at Cayer Behavioral Group Inc. as a Director of Insurance Operations for the Occupational and Speech Therapy Department. I work remotely but the address for the physical office is 2331 Hansen Ct. Tallahassee, FL, 32301. Phone number is 850-320-6555
Please summarize your work experience.	I've worked in the medical field for 12 years. The first 5 I worked as a medical assistant and the last 6 I've worked the revenue cycle aspect of medical care. I've worked for companies such as AdventHealth Corporate, TheraPlay at home and most recently Cayer Behavioral group. My main duties include employee management, authorization request, insurance billing and insurance company liaison.
List any volunteer service organizations, clubs, or professional societies you are a member of and give the positions or titles you have held.	Currently not affiliated to any organizations but most recently served as an English/Spanish interpreter for AdventHealth Hospitals and held a certification through ATLA.
Describe any additional knowledge, skill, education, or experience you have, which would assist you in the duties of this Board/Committee.	I am fully bilingual in English and Spanish, with experience serving diverse communities, including the special needs population. My background in both patient care and healthcare administration has given me strong organizational, problemsolving, and analytical skills, as well as the ability to navigate complex systems and regulations. I have extensive experience liaising between multiple stakeholders, coordinating services, and ensuring that the needs of individuals and families are met with care and efficiency. I am detail oriented, work well in collaborative settings, and am passionate about contributing to my community through a balanced, solutions focused approach to decision making.
Explain why you want to serve on this Board/Committee, and include any potential contribution you selection would bring.	I want to serve on this committee to actively contribute to decisions that positively impact Deltona's residents. My perspective working closely with the special needs community allows me to advocate for inclusive, practical solutions that benefit all.
Potential Conflict of Interest	No conflict of interest.

Have you ever been convicted for violation

No

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.

Chris Cayer - Tallahassee - (850) 264-1332 Shannon Dawkins - Tallahassee - (850) 544-4675 Ivonne Rivera - Orlando - (407) 414-8213

Additional Information or Comments

Field not completed.

Email not displaying correctly? View it in your browser.