DATE: January 28, 2022

TO: All Interested Parties

SUBJECT: Seeking Nominations

FROM: Cole Uecker, BVR Chairperson
       Alan Adel, SILC Chairperson

The Board of Vocational Rehabilitation (BVR) and Statewide Independent Living Council (SILC) need your assistance in identifying knowledgeable individuals who are committed to improving employment and independent living services for individuals with disabilities in South Dakota.

We are seeking nominations for vacancies due to occur the end of June. Received nominations are forwarded to the Governor for final review and selection. Members are typically appointed to serve a three-year term.

The BVR and SILC are federally mandated and must meet four times a year. Each has specific composition requirements which represents a cross-section of South Dakotans. BVR and SILC membership requirements mandate that a majority of members must be individuals with disabilities.

People with disabilities, parents or guardians of individuals with disabilities, and advocates for individuals with disabilities are encouraged to submit nominations. Representatives from organizations that provide services for individuals with disabilities are encouraged to apply as well.

More information and a nomination form are included. Nominations are due Friday, April 1st. Prior to submitting any nomination(s), please ask the potential nominee if they are willing and able to serve.

If you have any questions, we invite you to contact BVR/SILC staff at 1.605.494.3613 or at cwagoner@bhssc.org. Thank you for your consideration of this request and any subsequent nominations you submit to us.
Roles and Responsibilities:

Board of Vocational Rehabilitation (BVR)
• Attend and actively participate in BVR meetings and activities.
• Actively work on at least one BVR committee.
• Advise the Division of Rehabilitation Services on its performance, policy, and state plan.
• Serve as an advocate for all persons with disabilities seeking to reach their employment goals and aspirations through vocational rehabilitation services.
• Assist in preparation of South Dakota’s State Plan for Vocational Rehabilitation and Supported Employment services.

Statewide Independent Living Council (SILC)
• Attend and actively participate in all SILC meetings/activities.
• Actively work on at least one SILC committee or work team.
• Serve as an advocate for all persons with disabilities needing independent living services.
• Advise the State of South Dakota on the independent living needs of persons with disabilities.
• Provide leadership in the development and implementation of the State Plan for Independent Living.
• Concentrate on independent living issues, resources and solutions that are shaped by the geography, values, politics, and cultures unique to South Dakota.

Values Desired:
• Belief in the principle of equal access and equal opportunity.
• Commitment to the full inclusion of people with disabilities in all aspects of society.
• Honesty, integrity, and respect for others.
• Resistance to potential conflicts of interest.

Other Information:
❖ Nominations can be submitted at any time, however, nominations solicited for 2022 are due by April 1st, 2022.

❖ All appointments to the BVR and SILC are made by the Governor.

❖ In 2021, all meetings were held utilizing ZOOM which allows access by telephone. If meetings are held in person, member expenses (e.g., mileage, per diem, lodging if needed) resulting from participating in quarterly meetings or other board/council activities are reimbursed at state rates.
NOMINATION FORM

Select your preference:  
Board of Vocational Rehabilitation ______
Statewide Independent Living Council ______

Name: _______________________________________________________
Address: __________________________________________________________________________
Personal Phone: __________________ Work Phone: __________________
Disability: ___ Yes  ___ No  Occupation: __________________________
Email: __________________________________________________________

Current/former recipient of Independent Living Services  ___ Yes  ___ No
Current/former recipient of Vocational Rehabilitation Services  ___ Yes  ___ No

Biographical Sketch: _____________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Previous Board, Council or Community Advocacy Experience: ________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Other Information: _________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Nominated By (if other than self): _________________________________
Phone Number: __________________ Email: ________________________

Please Return by Friday, April 1st to:
infors@state.sd.us or
Division of Rehabilitation Services
3800 E Hwy 34, c/o 500 E Capitol Ave
Pierre, SD 57501