

H-200: Nomination Slate

Local Workforce Development Board Nomination Slate

PLEASE TYPE OR PRINT

1. Workforce Area: Workforce Solutions South Plains (02)
2. Name of Nominee: Kandace Decker
3. Organization Representing: Vocational Rehabilitation Services
4. Position/Title: Regional Director
5. Address: 1500 Broadway, Suite 800 City/Zip Code: Lubbock, TX 79401
6. Telephone Number: 806-407-0445 Fax: _____ Home: 806-293-7462
7. E-mail: kandace.decker@twc.texas.gov
8. Gender: ☐ Male ☒ Female
9. Race: What is the nominee's race? Mark one or more races to indicate what the nominee considers himself/herself to be.

<input checked="" type="checkbox"/> White	<input type="checkbox"/> Black/African American/Negro	<input type="checkbox"/> Chinese	<input type="checkbox"/> Korean
<input type="checkbox"/> Asian Indian	<input type="checkbox"/> American Indian/Alaska Native	<input type="checkbox"/> Samoan	<input type="checkbox"/> Japanese
<input type="checkbox"/> Vietnamese	<input type="checkbox"/> Guamanian or Chamorro	<input type="checkbox"/> Filipino	
<input type="checkbox"/> Native Hawaiian	<input type="checkbox"/> Some Other Race _____		
10. Hispanic Origin: Is the nominee Spanish/Hispanic/Latino?

<input checked="" type="checkbox"/> No, not Spanish/Hispanic/Latino	
<input type="checkbox"/> Yes. Mexican, Mexican American, Chicano	<input type="checkbox"/> Yes, Puerto Rican
<input type="checkbox"/> Yes, other Spanish/Hispanic/Latino, specify: _____	<input type="checkbox"/> Yes, Cuban
11. Reference Item 3. Please list any applicable **Employer TWC Tax Account Number(s)**:

1.) _____	2.) _____	3.) _____
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12. **Total Number of Employees** associated with Employer TWC Tax Account Numbers listed in Item 11: _____
13. Please indicate the Workforce Board category the nominee represents (**Check Only One**):

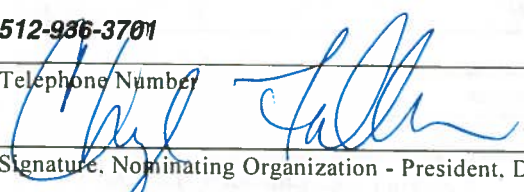
Private Sector Large/For-Profit Business (large 500 employees or more).....	<input type="checkbox"/>
Private Sector Small/For-Profit Business (fewer than 500 employees)	<input type="checkbox"/>
Other Private Sector.....	<input type="checkbox"/>
Education	<input type="checkbox"/>
Literacy Council	<input type="checkbox"/>
Economic Development	<input type="checkbox"/>
Vocational Rehabilitation.....	<input checked="" type="checkbox"/>
Public Employment Service (TWC)	<input type="checkbox"/>

Adult Basic and Continuing Education.....	<input type="checkbox"/>
Organized Labor [20 C.F.R. §628.410(a)(3)].....	<input type="checkbox"/>
Community-Based Organization (CBO)	<input type="checkbox"/>
Public Assistance.....	<input type="checkbox"/>
- Special Board Requirements** - Indicate, if applicable:

14. Nominee has expertise in child care or early childhood education	<input type="checkbox"/>
15. Nominee is a veteran AND is actively engaged in the field of veterans affairs or services	<input type="checkbox"/>

Chief Elected Official's Membership Guide for Local Workforce Development Boards

Texas Workforce Commission - VR Division

16. Name of Nominating Organization
101 E. 15th Street **Austin** **TX** **78778**
17. Street Address or P.O. Box of Nominating Organization City State Zip
512-936-3701 **512-463-9742**
18. Telephone Number Fax

19. Signature, Nominating Organization - President, Director, or other official Date of Signature
6/1/22
20. Cheryl Fuller TWC VR Division Director
Print or Type Name Print or Type Title

Individuals may receive, review and correct information that TWC collects about the individual by emailing to open.records@twc.state.tx.us or writing to TWC Open Records, Rm 266, 101 East 15th St, Austin, TX 78778-0001.

KANDACE DECKER
1200 S Broadway St., Plainview, Tx 79072
806.293.7462
hellodecker@gmail.com

EDUCATION

DECEMBER, 2005

MASTER OF REHABILITATION COUNELING, TEXAS TECH UNIVERSITY

MAY, 1998

BACHELOR OF SCIENCE, TEXAS TECH UNIVERSITY

Summa Cum Laude

EXPERIENCE

SEPTEMBER 1, 2016 – PRESENT

REGIONAL DIRECTOR

TEXAS WORKFORCE SOLUTIONS- VOCATIONAL REHABILITATION SERVICES

Provide leadership and management direction for activities in the region, ensuring compliance with all statutes, regulations, policies and standards. Direct and organize the development and implementation of strategies to support the strategic plan and achieve program performance standards, goals and objective. Oversight of the program and administrative budgets in the Region. Responsible for all personnel actions in Region One.

JULY 1, 2016 – AUGUST 31, 2016

AREA MANAGER

DEPARTMENT OF ASSISTIVE AND REHABILITATIVE SERVICES

Provided leadership to staff and managed the unit operations, personnel and consumer services to achieve quality outcomes and continuous quality improvement.

DECEMBER 1, 2014 – JUNE 30, 2016

STATE OFFICE PROGRAM SPECIALIST FOR WORKERS COMPENSATION

DEPARTMENT OF ASSISTIVE AND REHABILITATIVE SERVICES

Provided consultative and technical work in the planning, development, and implementation of vocational rehabilitation services in the application and use of workers' compensation information and vocational guidance.

SEPTEMBER 1, 2012 – NOVEMBER 30, 2014

MANAGEMENT OPERATIONS SPECIALIST

DEPARTMENT OF ASSISTIVE AND REHABILITATIVE SERVICES

Provided consultation and recommendations to regional management staff regarding personnel issues.

NOVEMBER 1, 2010 – AUGUST 31, 2012

REGIONAL PROGRAM SPECIALIST

DEPARTMENT OF ASSISTIVE AND REHABILITATIVE SERVICES

Provided consultation and technical assistance to field program staff, consumers, providers, employers and community organizations.

MARCH 1, 2010 – OCTOBER 31, 2010

REGIONAL TRAINING SPECIALIST

DEPARTMENT OF ASSISTIVE AND REHABILITATIVE SERVICES

Provided training to field staff on policy, procedures and the VR process.

OCTOBER 11, 1999 – FEBRUARY 28, 2010

VOCATIONAL REHABILITATION COUNSELOR

TEXAS REHABILITATION COMMISSION /DEPARTMENT OF ASSISTIVE AND
REHABILITATIVE SERVICES

Provided counseling and guidance to assist people with disabilities in achieving competitive, integrated employment.

PART H: FORMS

PART H-100: CONFLICT OF INTEREST STATEMENT FOR LOCAL WORKFORCE DEVELOPMENT BOARD MEMBERS

Board Nominee: Kandace Decker

Category Representing: Vocational Rehabilitation Services

1. Does board nominee, any entity or business he/she is involved with, or the organization for which he/she is being nominated to represent have a contract with the Board?
Yes ☐ No ☒ If yes, please explain.

If yes, nominee will need to make appropriate disclosures to the Board.

Martin Offine
Executive Director

5/9/2022
Date