Profile

Public Records Law Statement: Please be advised that this application and attachments submitted sent to and from Guilford County is subject to the NC Public Records Law and may be disclosed to third parties.

Submit Date: Nov 10, 2025

Confidentiality Statement: If appointed, please indicate to the Clerk's Office your preferred phone number and/or email you select to be shared to public.

Alicia		Kaplan		
First Name	Middle Initial	Last Name		
Email Address				
Street Address			Suite or Apt	
City Primary Phone	Alternate Ph	nne	State	Postal Code
Jewish Family Services of Greensboro Employer	Director Job Title			
Which Boards would you	like to ap	ply for?		
Commission on Aging: Submit	ted			
County Commissioner Dis	strict *			
☑ District 5				
Interests & Experiences	3			
Why are you interested i	n serving	on a board or	commission?	
As director of Jewish Family So helpful to have a marco persp				

Alicia Kaplan

Demographics

Upload a Resume

Alicia_Kaplan_resume_2024.docx

Ethnicity ✓ Caucasian/Non-Hispanic Gender ✓ Female