

City of Winston-Salem
Office of the Mayor - Allen Joines
Citizen Application for Advisory
Boards and Commissions

Name: Chad Cheek Race: Blk

Gender: male female Birthdate: 14 March 1970 E-mail Chad@elephantintheroom.com

Home Phone: 336. 287. 3607 Daytime Phone: 336. 725. 0110 Fax: _____

Home Address:
6009 Aaron Place Lane Kernersville, NC 27284

Do you live within the City Limits of Winston-Salem? (circle one) Yes No

Do you live within the County of Forsyth? (circle one) Yes No

Current Occupation/Title:
Owner, President

Employer/Business Name:
Elephant In The Room

Business Address and Zip:
301 N. Main St. Suite 2100 Winston-Salem, NC 27101

Supervisor Name: N/A Telephone: _____

Education: High School [] College [] Graduate School [] Other []

Degree/Subject of Study:
Business Degree (MBA)

School Name/Years Attended:
Wake Forest University 2004/2005

BOARD/COMMISSION APPLYING FOR (list one):

Business Improvement District (BID)

List the Board or Commission you currently serve and your term expiration date.

Downtown Winston-Salem Partnership Board (2020?)

Why are you interested in serving on the Board/Commission you are applying for?

Very interested in the continued improvement of
our downtown - As a downtown business owner.

Are you willing to serve on any other Board/Commission? Please list:

Yes - as appropriate or as needed.

Are you interested in serving in any other community volunteer activities?

Yes

PLEASE SUBMIT ANY RESUME CONTINUED ON NEXT PAGE >

Interest/Skills/Areas of Expertise/Professional Organizations

Bio Attached

List two personal references below.

Name: Jason Theil Daytime Telephone: 336.354.1500

Address: 305 W. 4th St.
Suite 2E / W-S, NC Relationship: Board

Name: Adam Sebastian Daytime Telephone: 336.701.0130

Address: 630 N. Liberty St.
W-S, NC Relationship: Colleague

AFFIRMATION OF ELIGIBILITY

Has any formal charge of professional misconduct, criminal misdemeanor or felony ever been filed

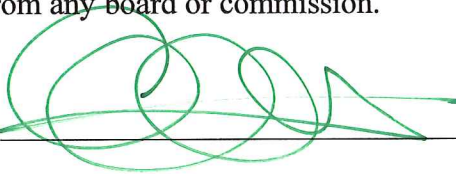
against you in any jurisdiction?

Yes No If yes, explain complete disposition. _____

Is there any possible conflict of interest or other matter that would create problems or prevent you from fairly and impartially discharging your duties as an appointee to a Board/Commission?
Yes _____ No If yes, explain

I understand this application is public record, and I certify that the facts contained in this application are true and correct to the best of my knowledge. I authorize and consent to background checks and to the investigation and verification of all statements contained herein. I further authorize all information concerning my qualifications to be investigated and release all parties from all liability for any damages that may result from this investigation. I understand and agree that any misstatement or conduct will be cause for my removal from any board or commission.

Signature of Applicant: _____



Date: 20 May '19

RETURN COMPLETED FORM TO:

Mayor's Office, P.O. Box 2511, Winston-Salem, NC 27102 Telephone: 336-727-2058 Fax: 336-748-3241