



CITY OF WINSTON-SALEM  
OFFICE OF THE MAYOR - ALLEN JOINES  
CITIZEN APPLICATION FOR ADVISORY  
BOARDS AND COMMISSIONS

Last Name: Miller First Name: Vicki Date: 11-22-19  
Middle Initial: Smith  
Gender:  Male  Female Race: African American Birthdate: 8-10-53  
Email: wbmvsma@aol.com Home Phone: 336-727-1061  
Daytime Phone: same Cell Phone: 336-416-5146  
Home Address: 2520 Treetop Lane  
Live in Winston-Salem City Limits?  Yes  No Live in Forsyth County?  Yes  No  
Are you a graduate of City of Winston-Salem University?  Yes  No Year \_\_\_\_\_

Current Occupation/Title: Retired. Former librarian  
Employer/Business Name: WSSU  
Business Address (with zip code): \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_

Education:  High School  College  Graduate School  Other: \_\_\_\_\_  
Degree and Subject of Study: BA, History-Government; MLS, Master of Library Science  
School Name/Years Attended: Virginia Union Univ; UNCG  
1971-1975 1985-1988

Applying for Board/Commission (enter one): Public Assembly Facilities Commis  
Why are you interested in serving on that Board/Commission? I am seeking to promote the use and variety of all available facilities to all W-S citizens.

What Board or Commission are you currently serving (if applicable)? None  
Term Expiration Date: \_\_\_\_\_

Are you willing to serve on any other Board/Commission?  Yes  No  
If yes, please list: \_\_\_\_\_

Are you interested in serving in any other community volunteer activities?  Yes  No  
If yes, please list: I am presently a mentor with Senior Academy, under the W-S Chamber of Commerce

Interests/Skills/Areas of Expertise/Professional Organizations: Historic Preservation, Charter Member, Preservation Forsyth

List two professional references below:

- 1. Name: Michelle McCullough Daytime Telephone: 336-747-7063  
 Address: 100 E. First Street  
 Relationship: Acquaintance through Historic Preservation
- 2. Name: Cheryl Harry Daytime Telephone: 336-721-7399  
 Address: \_\_\_\_\_  
 Relationship: Volunteers on Juneteenth Committee

**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: Vicki Smith Miller Date: 11-22-19

**PLEASE ATTACH RESUME**

**RETURN COMPLETED FORM TO:**

Mayor's Office, P.O. Box 2511, Winston-Salem, NC 27102

Website: <http://www.CityofWS.org/Government/PublicMeetings>

Email: [MayorsOffice@CityofWS.org](mailto:MayorsOffice@CityofWS.org) Fax: 336-748-3241 Telephone: 336-727-2058

*Note: Applications will be kept on file for two years from the date of application.*