



CITY OF WINSTON-SALEM
OFFICE OF THE MAYOR - ALLEN JOINES

CITIZEN APPLICATION FOR ADVISORY
BOARDS AND COMMISSIONS

Name: Rev. Joseph L. Nance Race: Negro
 Gender: male female Birthdate: 07-05-37 E-mail: REV.nance.1@windstream.net
 Home Phone: 336-423-0018 Daytime Phone: 336-546-2609 Fax: _____
 Home Address: 3913 Avera Ave WS, NC 27106
 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: Retired
 Employer/Business Name: _____
 Business Address and Zip: _____
 Supervisor Name: _____ Telephone: _____
 Education: High School College Graduate School Other
 Degree/Subject of Study: Religion
 School Name/Years Attended: WS Bible College, Livingston College, VA Union

BOARD/COMMISSION APPLYING FOR (list one): _____

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

Creative Corridor

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

Park & Recreation

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

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

Interest/Skills/Areas of Expertise/Professional Organizations

Pastoral Leadership

List two personal references below.

Name: Walter Marshall, Comm. County Daytime Telephone: 336-703-2020

Address: 201 N. Chestnut St. WS, NC Relationship: none

Name: Dr. John Mendes Daytime Telephone: 336-788-7023

Address: 1075 Shelburne Dr WSNC Relationship: none

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: Joseph L. Vance, Sr Date: 09-30-13

RETURN COMPLETED FORM TO:

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

*Partial
10/01/2013
J.W.*