

Citizen Board and Commission Application

First Name & Middle
Initial

Ned

Last Name

Erickson

Gender

Male

Race

White

Birthdate

9/24/1974

Email

nederickson@gmail.com

Phone

3364134918

Additional Phone

Field not completed.

Address

785 Meadowlark Dr.

City

Winston Salem

State

NC

Zip Code

27106

Do you live in Winston-
Salem City limits?

Yes

Do you live in Forsyth
County?

Field not completed.

Are you a graduate of the
City of Winston-Salem
University?

No

(Section Break)

Education	College
School Name/Years Attended	Davidson College 93-97
Degree & Subject of Study	English
Current Employer Name	Piedmont Federal
Job Title	Director of Community Impact
(Section Break)	
Applying for Board/Commission (Enter One):	Bicycle Pedestrian and Active Mobility Advisory Committee
What Board or Commission are you currently serving?	<i>Field not completed.</i>
Why are you interested in serving on that Board/Commission?	I am an avid cyclist and runner and lived in the Denver Metro Area, which has an extensive bike and pedestrian system and I have personally witnessed how it has benefited that community both business and residents.
Are you willing to serve on any other Board/Commission?	No
Are you interested in serving in any other community volunteer activities?	No

Interests/Skills/Areas of
Expertise/Professional
Organizations

Project Management, Communications, Community
Mobilization, and Peacemaking

(Section Break)

List Two Professional References

First Name

David

Last Name

Barksdale

Address

201 S. Stratford Rd

City

Winston Salem

State

NC

Zip Code

27101

Phone

3368300065

Relationship

Boss

(Section Break)

First Name

David

Last Name

Speakman

Address

2050 N Peacehaven Rd.

City

Winston Salem

State

NC

Zip Code 27106

Phone 7047791273

Relationship Pastor

(Section Break)

Affirmation of Eligibility

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? No

I understand this application is public record, and I certify 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 any misstatement or conduct will be cause for my removal from any board or commission.

Signature Ned Erickson

Date 12/12/2023

Return Completed Form
Mayor's Office
P.O. Box 2511
Winston- Salem, NC 27102
Phone: 336-727-2058

Fax: 336-748-3241

[Email the Mayor's Office](#)

Please include your resume when submitting your application.

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