

Citizen Board and Commission Application

First Name & Middle Initial Suneel K

Last Name Parvathareddy

Gender M

Race Asian

Birthdate 7/21/1979

Email sun21sun9@gmail.com

Phone 516-419-2743

Additional Phone *Field not completed.*

Address 5621 Hundley Rd

City Winston Salem

State NC

Zip Code 27106

Do you live in Winston-Salem City limits? Yes

Do you live in Forsyth County? Yes

Are you a graduate of the City of Winston-Salem University? No

(Section Break)

Education	Other
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Please List	Medicine/MBA
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School Name/Years Attended	Northwell Health 2015
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Degree & Subject of Study	MD Family Medicine
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Current Employer Name	Atrium Wake Forest Baptist
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Job Title	Medical Director
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(Section Break)

Applying for Board/Commission (Enter One):	Board of Health
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What Board or Commission are you currently serving?	NA
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Why are you interested in serving on that Board/Commission?	To help implement the policies and programs effectively to the underserved and improve overall health standards and quality of life in the county
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Are you willing to serve on any other Board/Commission?	Yes
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Please List	Any board
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Are you interested in serving in any other community volunteer activities?

Yes

Please List Any available positions

Interests/Skills/Areas of Expertise/Professional Organizations Health care, Public health, Preventive care, Health Policy and Promotion, Education, Human Resources, Art and culture

(Section Break)

List Two Professional References

First Name Chad

Last Name Brown

Address 1370 W D St

City N Wilkesboro

State NC

Zip Code *Field not completed.*

Phone *Field not completed.*

Relationship Employer

(Section Break)

First Name Joseph

Last Name Calvert

Address 1370 W D St

City N Wilkesboro

State NC

Zip Code *Field not completed.*

Phone *Field not completed.*

Relationship Employer

(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 Suneel Parvathareddy

Date

4/21/2024

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.
