Citizen Board and Commission Application

First Name & Middle Initial	Timothy P
Last Name	Sechrest
Gender	Male
Race	Field not completed. (Linda, I checked his FB page and he's white)
Birthdate	6/26/1963
Email	timothy.sechrest@wellsfargo.com
Phone	336-918-3177
Additional Phone	Field not completed.
Address	716 Quarterstaff Road
City	Winston-Salem
State	NC
Zip Code	27104
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	No

University?

(Section Break)		
Education	Graduate School	
School Name/Years Attended	UNC 1981-1985 undergrad; UNCCharlotte 1990-1992 MBA	
Degree & Subject of Study	Math / Business	
Current Employer Name	Wells Fargo	
Job Title	Sr. VP	
	(Section Break)	
Applying for Board/Commission (Enter One):	Business Improvement District Advisory Committee	
What Board or Commission are you currently serving?	Field not completed.	
Why are you interested in serving on that Board/Commission?	Asked by Jason Thiel in conjunction with my current service on DWSP board.	
Are you willing to serve on any other Board/Commission?	No	
Are you interested in serving in any other community volunteer	No	

activities?

activities:		
Interests/Skills/Areas of Expertise/Professional Organizations	Field not completed.	
	(Section Break)	
List Two Professional R	eferences	
First Name	Jason	
Last Name	Thiel	
Address	515 North Cherry St.	
City	Winston-Salem	
State	NC	
Zip Code	27101	
Phone	336-354-1500 ext 1	
Relationship	Field not completed.	
	(Section Break)	
First Name	Michael	
Last Name	Rogers	
Address	100 North Main St.	
City	Winston-Salem	

State	NC	
Zip Code	27101	
Phone	336-842-7289	
Relationship	manager at work	
	(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	Tim Sechrest
Date	2/6/2024
Return Completed Form Mayor's Office P.O. Box 2511	

Winston- Salem, NC 27102

Phone: 336-727-2058 Fax: 336-748-3241 <u>Email the Mayor's Office</u>

Please include your resume when submitting your application.

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