Citizen Board and Commission Application

First Name & Middle Initial	Keyra M
Last Name	Williams
Gender	Female
Race	Black
Birthdate	1/24/1975
Email	keyrafaulkner@yahoo.com
Phone	336-995-1475
Additional Phone	Field not completed.
Address	5072 Bismark Street
City	Winston Salem
State	NC
Zip Code	27105
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	Graduate School
School Name/Years Attended	Salem College/ Wake Forest
Degree & Subject of Study	Biology, Religious Studies, MBA
	(Section Break)
Applying for Board/Commission (Enter One):	Community Sustainability Program Committee
What Board or Commission are you currently serving?	Community Sustainability Program Committee
Why are you interested in serving on that Board/Commission?	I have served on this committee addressing sustainability issues in my community. There is a lack of interested or knowledgeable community members in my area that can or will contribute to the mission.
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	Field not completed.

(Section Break)

List Two Professio	nal References
First Name	Helen
Last Name	Peplowski
Address	Field not completed.
City	Winston Salem
State	NC
Zip Code	27101
Phone	(336) 397-7929
Relationship	Volunteered under her as Sustainability Program Director
	(Section Break)
First Name	George
Last Name	Redd
Address	Field not completed.
City	Winston Salem
State	NC
Zip Code	27105
Phone	336-409-1844

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 Keyra M. Williams

Date 11/28/2022

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.