

Citizen Board and Commission Application

First Name & Middle Initial Walter

Last Name Farabee

Gender male

Race black

Birthdate 9/16/1987

Email farabew@rjrt.com

Phone 3364165567

Additional Phone *Field not completed.*

Address 401 N Main Street

City Winston Salem

State NC

Zip Code 27101

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	High School, College, Graduate School
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School Name/Years Attended	Hampton University 2005-2009
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Degree & Subject of Study	Economics
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Current Employer Name	Reynolds American
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Job Title	Senior Manager of Community Engagement
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(Section Break)

Applying for Board/Commission (Enter One):	Downtown Business Improvement District Advisory Committee
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What Board or Commission are you currently serving?	Planning Board
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Why are you interested in serving on that Board/Commission?	I am interested in the further development of downtown and the opportunity to further diversify offerings and opportunities for growth
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Are you willing to serve on any other Board/Commission?	No
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Are you interested in serving in any other community volunteer activities?	No
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Interests/Skills/Areas of Expertise/Professional Organizations urban planning, architecture, design

(Section Break)

List Two Professional References

First Name Michael

Last Name Kelly

Address *Field not completed.*

City *Field not completed.*

State NC

Zip Code *Field not completed.*

Phone 919-605-2148

Relationship personal

(Section Break)

First Name kara

Last Name Calderon

Address *Field not completed.*

City Winston-Salem

State NC

Zip Code *Field not completed.*

Phone 336 741-0536

Relationship *Field not completed.*

(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 Walter Farabee

Date 2/21/2024

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.
