Citizen Board and Commission Application

First Name & Middle Initial	Celine V
Last Name	Richard
Gender	F
Race	Caucasian
Birthdate	3/30/1996
Email	cvrichar@ncsu.edu
Phone	3363991001
Additional Phone	Field not completed.
Address	1450 Fairchild Rd
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	Louisiana State University/ 6
Degree & Subject of Study	Bach: Horticulture Sci+ French Studies Masters: Environmental Science
Current Employer Name	N.C. Cooperative Extension, Forsyth County Center
Job Title	Horticulture Agent
	(Section Break)
Applying for Board/Commission (Enter One):	Fair Planning Committee
What Board or Commission are you currently serving?	Field not completed.
Why are you interested in serving on that Board/Commission?	To see how our office at NC Cooperative Extension can collaborate with the fair activities.
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	Field not completed.
Expertise/Professional	
Organizations	

(Section Break)

List Two Professional References

First Name	Kimberly
Last Name	Gressley
Address	1450 Fairchild Rd
City	Winston- Salem
State	NC
Zip Code	27105
Phone	336-703-2850
Relationship	Supervisor
	(Section Break)
First Name	Kathy
Last Name	Hepler
Address	1450 Fairchild Rd
City	Winston-Salem
State	NC

Zip Code	27103
Phone	336-703-2850
Relationship	Colleague
	(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	Celine Richard
Date	6/5/2024
Return Completed Form Mayor's Office	
P.O. Box 2511	
Winston- Salem, NC 271	02
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.