

CITY OF WINSTON-SALEM OFFICE OF THE MAYOR - ALLEN JOINES

CITIZEN APPLICATION FOR ADVISORY BOARDS AND COMMISSIONS

		Date: 5/	12/2017				
Last Name: Hines	First Name: Wor	ine, Rev.	Middle Initial: H.				
Gender: ☐ Male ☐ Female Rac	ce:	Birthdate:	02/14/1948				
Email: yhhines@ mountsina	Home Phone: 336,924.1015						
Daytime Phone: 336.722.26.24 Cell Phone: 336,416.6537							
Home Address: 1441 Turfwood Drive Gafftown, NC 27040							
Live in Winston-Salem City Limits? Yes Do Live in Forsyth County? Pes Do							
Are you a graduate of the City of Winston-Salem University? Year Year							
Current Occupation/Title Clergy / (Former Public Schod/College Educator)							
Employer/Business Name Mount Sinai Church							
Business Address (with zip code): 2721 Manchester St. WS/NC 27105							
Supervisor's Name: Executive Board							
Education: MHigh School MCollege MGraduate School MOther: Advanced Studies							
Degree and Subject of Study: B.S. (English) M. Div (Theology)							
School Name/Years Attended: Winston-Salem State Univ (1967-1971) Walke Forest (2006-09)							
Applying for Board/Commission (enter one): Utilities Commission,							
Why are you interested in serving Asan a	Asan active community leader, I am always interested						
on that Board/Commission? in 5-ex.	in serving our citizens in a positive capacity						
1	None						
you currently serving? Term Ex	Term Expiration Date:						
Are you willing to serve on any other Board/Commission? [] Yes No Not@thistime							
If yes, please list:							
Are you interested in serving in any other community volunteer activities? Yes No Notes this time							
If yes, please list:							
Interests/Skills/Areas of Jam respectionally interested in community uplifts Expertise/Professional educational progression for all ages. Organizations: Sinai CDC, Citizens Impact Committee, Community Redevelopment							
Organizations: S as a conditional progression of an ages.							
SINAI CUC, CHIZENS Ampact Committee, Community really exponent							

List two professional references below:								
1.	Name:	Dr. Bill Leonard	Daytin	ne Phone:	336.75 8 ,4315			
	Address:	Wake Forest University WS/WC						
	Relationship:	Professor						
2,	Name:	Dr. Sir WalterMack, Sr. Union Baptist Church WS/NC	Daytim	e Phone:	306. 124.930S			
	Address:	Union Baptist Chuich WS/NC						
	Relationship:	Fellow Clergy						
AFFIRMATION OF ELIGIBILITY								
Has any formal charge of professional misconduct, criminal misdemeanor, or felony ever been filed against you in any jurisdiction? Yes No								
If yes, explain.								
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? Yes Vo								
	If yes, explain.							
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.								
•	nature of Applican lease print and sign		Date:	5/12/	12017			

PLEASE ATTACH RESUME

RETURN COMPLETED FORM TO:

Mayor's Office, P.O. Box 2511, Winston-Salem, NC 27102

Website: http://www.CityofWS.org/Government/PublicMeetings Email: <u>MayorsOffice@CityofWS.org</u> Fax: 336-748-3241 Telephone: 336-727-2058

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