

Form Center

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Citizens Board & Commission Application

Save Progress

* indicates a required field

First Name*

Gary

Last Name*

Gilbert

Gender

Male

Race

White

Birthdate

03/07/1955

Phone*

336-972-5055

Email Address*

ggilbert@triad.rr.com

Additional Phone

Address*

775 Oaklawn Avenue

City*

Winston-Salem

State*

North Carolina

ZIP Code*


27104

Do you live in Winston-Salem City limits?*

Yes No

Do you live in Forsyth County?*

Yes No

Select Language 

Google Translate

Are you a graduate of the City of Winston-Salem University (CWSU)?*

Yes

No

Education*

School Name / Years Attended

High School

UNC-1977-BS, Wake Forest Univ-1985-,MBA

College

Graduate School

Other

Degree & Subject of Study

Business Administration, Finance

Current Employer Name*

Retired, Exec VP, Truist (formerly BB&T)

Job Title*

Business Loan Administrator

Applying for*

City of Winston-Salem Police Officers' Retirement S

What Board or Commission are you currently serving?

*

NA

Please include expiration date*

mm/dd/yyyy

Why are you interested in serving?*

The responsibilities of the position are within the scope of my financial competence and understanding. Also, I understand the general regulations and accounting principles of pensions. I have approved buyout financing of several money management firms that handled pensions as well as other types of investments for their clients. I am also conversant with private pensions and the under-funding and over-funding and the implications thereof.

mm/dd/yyyy

hh:mm am/pm

Are you interested in serving in any other community volunteer activities*

Yes

No

List Two Professional References

First Name*

Robert

Last Name*

Clark

Address*

2815 Country Club Rd

City*

Winston-Salem

State*

NC

ZIP Code*

27104

Phone*

336-416-0190

Relationship*

Friend

First Name*

Chris

Last Name*

Henson

Address*

550 Belmeade Way Trail

City*

Lewisville

State*

NC

ZIP Code*

27023

Phone*

336-816-8722

Relationship*

COO, Truist- had a long-term business relationship

Affirmation of Eligibility

Is there any possible conflict of interest of other matter that would create problems or prevent you from fairly and impartially discharging your duties as an appointee to a Board / Commission?*

Yes

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, including employment records, 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*



Date*

05/10/2026

Please include your resumé when submitting your application*

No file chosen

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

Receive an email copy of this form.