Citizen Board and Commission Application

First Name & Middle Initial	Phyllis
Last Name	D'Agostino
Gender	Female
Race	White
Birthdate	11/20/1952
Email	prosefolmar@gmail.com
Phone	336-391-0129
Additional Phone	Field not completed.
Address	2414 Elizabeth Avenue
City	Winston-Salem
State	NC
Zip Code	27103
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?	Yes

What year did you2023graduate?

(Section Break)		
Education	Graduate School	
School Name/Years Attended	Kent State University, 1988-1991	
Degree & Subject of Study	BS - Advertising and M.Ed., Ed.S. Community Counseling	
Current Employer Name	Triad Lamaze	
Job Title	Childbirth Educator	
	(Section Break)	
Applying for Board/Commission (Enter One):	Human Relations Commission	
What Board or Commission are you currently serving?	Field not completed.	
Why are you interested in serving on that Board/Commission?	Believe an important topic and service to our community	
Are you willing to serve on any other Board/Commission?	Yes	
Please List	Community Agency Allocations Committee	

Are you interested in serving in any other community volunteer activities?	Yes
Please List	Depends on activity
Interests/Skills/Areas of Expertise/Professional Organizations	Community health and safety. Extensive experience in community resource development and maternal and child health. Serve on the following boards and advisory councils: Child Care Resource Center, Anuli Pregnancy Care, Forsyth County Infant Mortality Reduction Coalition, Nurse Family Partnership, Hispanic League, Ardmore Neighborhood Association. Volunteer as an ESL Conversation Partner with the YMCA.

(Section Break)

List Two Professional References

First Name	Katura
Last Name	Jackson
Address	500 W 4th St #202
City	Winston-Salem
State	NC
Zip Code	27101
Phone	336-682-0073
Relationship	Friend and colleague
	(Section Break)

First Name	Carla
Last Name	Catalan Day
Address	114 W. 30th Street, Suite 900
City	Winston-Salem
State	North Carolina
Zip Code	27105
Phone	336-745-7253
Relationship	friend, and 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

Phyllis Rose D'Agostino

Date

4/26/2024

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.