

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

JAN 23 2019

CITIZEN APPLICATION FOR ADVISORY BOARDS AND COMMISSIONS

							Date: 01/17/2019				
Last Name: Young					Fi	First Name: Angela		а	Middle Initial:	М	
Gender:			R	ice:	e: Black		Birthdate:	03/21/1983	03/21/1983		
Email: amyoung@young				lobalhealth.net				Home Phone	904-924-4772		
Daytime Phone:			Cell Phone: 9			Phone: 9	04-924-4772				
Home Address: 217B New Dr Apt C Winston Salem, NC 27103											
Live in Winston-Salem City Limits? ■ Yes □ No Live in Forsyth County? ■ Yes □ No											
Are you a graduate of the City of Winston-Salem University? Yes No Year											
Current Occupation/Title					Health Insurance Agency Owner						
Employer	Employer/Business Name Young Global Health										
Business Address (with zip code): 500 W 4th st Suite 101 Winston Salem, NC 27101											
Supervisor's Name: n/a											
Education: High School College Graduate School Other:											
Degree an	Degree and Subject of Study: Business Administration										
School Name/Years Attended: Winston Salem State University/2											
Applying for Board/Commission (enter one): Minority/Women Business Advisory Board											
Why are you interested in serving on that Board/Commission?				I am a minority woman business owner here in Winstion Salem, NC							
What Board or Commission are Piedmont Environmental Alliance											
you currently serving?			Term Expiration Date: n/a								
Are you willing to serve on any other Board/Commission? Yes No											
If yes,	If yes, please list: Sustainability Board										
Are you interested in serving in any other community volunteer activities?											
If yes,	If yes, please list: Any compacity that needs help.										
Interests/Skills/Areas of Sustainability, Business, Insurance, Expertise/ Professional Organizations:											

List two professional references below:									
1.	Name:	Lisa Campbell	Daytime Phone:	3369176090					
	Address:	500 W 4th St Suite 300 Winston Salem, NC 27101							
	Relationship:	Business Landlord							
2.	Name:	Allan Younger	Daytime Phone:	3367573804					
	Address:	2100 Silas Creek Parkway Winston Salem, NC 27103							
	Relationship:	Colleague							
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 No									
	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.									
Signature of Applicant: (Please print and sign.) Date: 01/17/2019									

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: MayorsOffice@CityofWS.org Fax: 336-748-3241 Telephone: 336-727-2058

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