

## Citizen Board and Commission Application

First Name & Middle Initial      Stephen M

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Last Name      Doughton

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Gender      Male

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Race      White

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Birthdate      6/23/1989

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Email      [sdoughton@shelcollic.com](mailto:sdoughton@shelcollic.com)

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Phone      336-813-2187

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Additional Phone      *Field not completed.*

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Address      370 Staffordshire Road

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City      Winston-Salem

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State      North Carolina

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Zip Code      27104

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Do you live in Winston-Salem City limits?      Yes

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Do you live in Forsyth County?      Yes

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Are you a graduate of the City of Winston-Salem University?      No

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(Section Break)

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Education	College
School Name/Years Attended	UNC Charlotte 2008-2012
Degree & Subject of Study	Criminal Justice & Psychology

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(Section Break)

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Applying for Board/Commission (Enter One):	Utility Commission
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What Board or Commission are you currently serving?	<i>Field not completed.</i>
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Why are you interested in serving on that Board/Commission?	I am interested in the Commission as a way to give back to the City of Winston-Salem. I am born and raised here in Winston and have loved being back in the City for over 6 years. I love to learn new things and I look forward to the opportunity to learn more about the City/County Utilities.
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Are you willing to serve on any other Board/Commission?	Yes
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Please List	<i>Field not completed.</i>
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Are you interested in serving in any other community volunteer activities?	Yes
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Please List

*Field not completed.*

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Interests/Skills/Areas of Expertise/Professional Organizations

Interests: Sports - Basketball, golf and Football. I love hanging out with my wife and two boys.

I am currently apart of the WS Alliance Board, Greater Winston-Salem Inc Emerging Leaders committee and my family and I have a foundation that supports Leukemia Research at Atrium Health Wake Forest Baptist Cancer Center.

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(Section Break)

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List Two Professional References

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First Name

Mark

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Last Name

Owens

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Address

411 W 4th St #211

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City

Winston-Salem

---

State

NC

---

Zip Code

27101

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Phone

864-315-9883

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Relationship

Friend/Mentor

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(Section Break)

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First Name

Jonathan

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Last Name

Smith

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Address 111-H Reynolda Village

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City Winston-Salem

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State NC

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Zip Code 27101

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Phone 704-975-7894

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Relationship Business Client & Friend

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(Section Break)

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#### Affirmation of Eligibility

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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

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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.

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Signature Stephen Doughton

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Date

1/18/2023

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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.*

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

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