Citizen Board and Commission Application

First Name & Middle Initial	Michael	
Last Name	Flatt	
Gender	Male	
Race	White	
Birthdate	9/2/1984	
Email	michael.david.flatt@gmail.com	
Phone	315-278-6581	
Additional Phone	Field not completed.	
Address	200 Carolina Circle	
City	Winston Salem	
State	NC	
Zip Code	27104	
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?	No	
(Section Break)		
Education	Graduate School	
School Name/Years Attended	University at Buffalo, SUNY 2013-2019	
Degree & Subject of Study	PhD, English	
	(Section Break)	

Applying for Board/Commission (Enter One):	Citizen's Police Review Board	
What Board or Commission are you currently serving?	N/A	
Why are you interested in serving on that Board/Commission?	I would like to work on behalf of the people of Winston Salem to ensure that police officers are held accountable to the law.	
Are you willing to serve on any other Board/Commission?	Yes	
Please List	Transit Authority or Bicycle/Pedestrian/Active Mobility Advisory Committee	
Are you interested in serving in any other community volunteer activities?	Yes	
Please List	Field not completed.	
Interests/Skills/Areas of Expertise/Professional Organizations	Teaching, writing, editing, graphic design. Member of the Modern Language Association and the Association of Writing Professionals.	
	(Section Break)	
List Two Professional References		
First Name	Bryan	
Last Name	Vescio	
Address	207 Norcross Hall, One University Parkway	
City	High Point	
State	NC	
Zip Code	27268	
Phone	920-544-6486	

Relationship	Department Chair (manager)	
(Section Break)		
First Name	Timothy	
Last Name	O'Keefe	
Address	1554 W. Northwest Blvd.	
City	Winston Salem	
State	NC	
Zip Code	27104	
Phone	612-968-1470	
Relationship	Assistant Professor (coworker)	
(Section Break)		
Affirmation of Eligibility		
Has any formal charge of professional misconduct, criminal misdemeanor, or felony ever been filed against you in any jurisdiction?	No	
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	Michael Flatt
Date	7/15/2020

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.