



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

CITIZEN APPLICATION FOR ADVISORY
BOARDS AND COMMISSIONS

Name: Franklin L. Stowe II Race: Black

Gender: Male Female Birthdate: 12/30/1990 Email: fstowe13@gmail.com

Home Phone: 336-830-0298 Daytime Phone 336-830-0298 Fax: _____

Home Address: 100 Five Royales Drive, Winston-Salem, NC 27105

Do you live within the City Limits of Winston-Salem? Yes No

Do you live within the County of Forsyth? Yes No

Current Occupation/Title: N/A

Employer/Business Name: _____

Business Address and Zip: _____

Supervisor's Name: _____ Telephone: _____

Education: High School College Graduate School Other

Degree/Subject of Study: Bachelor of Science - Public Administration

School Name/Years Attended: Virginia State University; 8/2009 - 5/2013

Board/Commission Applying For (list one): Citizen Police Review Board

List the Board or Commission you currently serve and your term expiration date: N/A

Why are you interested in serving on the Board/Commission you are applying for? Serving on this board will enhance my understanding of the policy and procedure of our police department; it will give me the opportunity to be instrumental in resolving problems that may arise with my fellow citizens

Are you willing to serve on any other Board/Commission? Please list: Yes; Sustainability, Parks and Recreation

Are you interested in serving in any other community volunteer activities? Yes

Interests/Skills/Areas of Expertise/Professional Organizations: Leadership development; team building knowledge of Arabic language; member of Kappa Alpha Psi Fraternity, Inc.

List two personal references below.

Name: Christopher Leak Daytime Telephone: 336-558-7417

Address: _____ Relationship: Friend

Name: Geoffrey Duckett Daytime Telephone: 703-346-3667

Address: _____ Relationship: Business Associate

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 complete disposition.

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 that 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 that any misstatement or conduct will be cause for my removal from any board or commission.

Signature of Applicant: Franklin Duckett Date: 10/9/13

PLEASE SUBMIT ANY RESUME

*Partial
10/09/2013
B.W*