APPROVED

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



CITIZEN APPLICATION FOR ADVISORY **BOARDS AND COMMISSIONS**

| Name: Rober & Leak III Race: Officen - american blk. |
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| Gender: male female Birthdate: 13-07-1988 E-mail Caston eight and association egonation |
| Home Phone: 336-785-2136 Daytime Phone: 336-552-4538 Fax: |
| Home Address: 1227 How-75t. Winston-Salem NC 27107 |
| Do you live within the City Limits of Winston-Salem? (circle one) Yes No |
| Do you live within the County of Forsyth? (circle one) Yes No |
| Current Occupation/Title: Sale associate |
| Employer/Business Name: Sears Holdings Company |
| Business Address and Zip: Hanes Mall Circle 27105 |
| Supervisor Name: Maria Corbett Telephone: 336-659-7200 |
| Education: High School [] College [] Graduate School [] Other [] |
| Degree/Subject of Study: |
| School Name/Years Attended: Parkland High School 2004-2007 |
| BOARD/COMMISSION APPLYING FOR (list one): Human Relation s Commission |
| List the Board or Commission you currently serve and your term expiration date. |
| Why are you interested in serving on the Board/Commission you are applying for? 1 In terest in joining Hyman Relations commission, are working with all |
| ethnics background in w. S. my work in clucks everyday working inside my committee for Building Relations from all ethnics backgrounds. In willing to serve a learn more. Are you willing to serve on any other Board/Commission? Please list: |
| Citizen Police Board |
| Are you interested in serving in any other community volunteer activities? |
| PLEASE SUBMIT ANY RESUME CONTINUED ON NEXT PAGE > |

APPROVED

| Interest/Skills/Areas of Expertise/Professional Organizations |
|--|
| Neighbor for better Neighborhoods board member, Easton Presenct |
| President Easton Neighborhood Association, Pres. Easton Youth associa |
| List two personal references below. |
| Name: Mrs. Annett Lynch Daytime Telephone: 33/0-725-0388 Address: Winston-Salem Foundation Relationship: Friend |
| Address: Winston-Salem Foundation Relationship: Friend |
| Name: Mrs. Nakida Modaids Daytime Telephone: 336-722-1973 |
| Address: Neighbor for better Neighborhod's Relationship: Friend |
| |
| 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 |
| |
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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? |
| Yes No If yes, explain |
| Tes Tryes, 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: Rubert dull Date: 6/29/2011 |