Citizen Board and Commission Application

First Name & Middle Initial	Carla
Last Name	Hoots
Gender	Female
Race	White
Birthdate	9/4/1966
Email	carla@faderre.com
Phone	3363454834
Additional Phone	Field not completed.
Address	306 SHERWOOD FOREST RD
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	Field not completed.
School Name/Years Attended	Elon/1984-1988
Degree & Subject of Study	BS - Accounting
Current Employer Name	Self
Job Title	Realtor
	(Section Break)
Applying for Board/Commission (Enter One):	Human Relations
What Board or Commission are you currently serving?	none
Why are you interested in serving on that Board/Commission?	Equality of all people is important to me
Are you willing to serve on any other Board/Commission?	Yes
Please List	Police Advisory
Are you interested in serving in any other community volunteer	Yes

activities?

Please List	not sure
Interests/Skills/Areas of Expertise/Professional Organizations	I am a relator by trade - have a degree in accounting - enjoy talking about our city and what all it has to offer
	(Section Break)
List Two Professional Ref	erences
First Name	Carol
Last Name	Fowler
Address	3438 Royalton Street
City	Winston Salem
State	NC
Zip Code	27104
Phone	3362871700
Relationship	worked for
	(Section Break)
First Name	Ken
Last Name	Mackovic
Address	3500 Vernon Woods Dr

City	Summerfield	
State	NC	
Zip Code	27358	
Phone	336-508-7400	
Relationship	worked for	
(Section Break)		
Affirmation of Eligibility		

Affirmation of Eligibility

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	Carla Hoots
Date	8/8/2024
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.