

Citizen Board and Commission Application

First Name & Middle Initial James T

Last Name Mitchell

Gender Male

Race Caucasian

Birthdate 3/18/1965

Email jthorntonmitchell@gmail.com

Phone 336-403-5098

Additional Phone *Field not completed.*

Address 3330 Pennington Ln

City Winston-Salem

State NC

Zip Code 27106

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	NCSU 1993-1995
Degree & Subject of Study	MS Forestry

(Section Break)

Applying for Board/Commission (Enter One):	Sustainability
What Board or Commission are you currently serving?	n/a
Why are you interested in serving on that Board/Commission?	I feel that my training and experience would be beneficial to the City of Winston-Salem, as well as the Sustainability Committee. Honestly, I want to work to make my community a better and more sustainable place to live, work and play.
Are you willing to serve on any other Board/Commission?	No
Are you interested in serving in any other community volunteer activities?	Yes
Please List	Various KWSB events
Interests/Skills/Areas of Expertise/Professional	Horticulture, Forestry, Building Maintenance, Transportation

Organizations

(Section Break)

List Two Professional References

First Name	Keith
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Last Name	Finch
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Address	PO Box 2511
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City	Winston-Salem
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State	NC
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Zip Code	27102
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Phone	336-748-3162
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Relationship	Former Co-Worker
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(Section Break)

First Name	George
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Last Name	Stilphen
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Address	PO Box 2511
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City	Winston-Salem
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State	NC
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Zip Code	27102
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Phone 336-771-5161

Relationship Former Co-Worker

(Section Break)

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 James T Mitchell

Date 10/28/2022

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.
