

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

CITIZEN APPLICATION FOR ADVISORY BOARDS AND COMMISSIONS

												
						Date:	1	10/28/2024				
Last Nam	ne: Rui	nley	F		First Name:		Daina			Mic	ldle Initial:	L
Gender: ☐ Male ☒ Female			(African Race: American)	Birthdate: 06/16/			1984	
Email:	org					Home F	Phone:	one: Click				
Daytime Phone: 336-722-6296			Cell Phone:				Phone:	336-408-7651				
Home Ac	Clemmons NC 27012											
Live in W	? □ Yes ⊠ No Live in					n Forsyth County? □ Yes ⊠ No						
Are you a graduate of City of Winston-Salem University? ☐ Yes							⊠ No	Year Click			ζ	
Current C	Office Administrator of Finance											
Employe	Imprints Cares											
Business	711 Coliseum Plaza Court Winston Salem NC 27106											
Supervisor's Name: Regina Wood												
Education: ☐ High School ☐ College ☒ Graduate School ☐ Other: If Other Education, Click									Click			
Degree a	Business Administration Finance											
School N	Appalachian State & Strayer											
Applying	for Boar	rd/Commission (li	st one):	Fair	Pla	nning (Committ	tee				
What Board or Commission are you currently serving?												
If applicable:			Term Expiration Date: Click									
Why are you interested in serving on that Board/Commission?			I am interested in serving on the Fair Planning Committee to give back to my community and lend a helping hand where it is needed.									
Are you v	willing to	serve on any oth	er Board/	Comi	miss	ion?	⊠ Yes	□ No				
If yes, ple	If yes, please list: If applicable, click.											

Updated 8/3/2021 Page **1** of **2**

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Are you interested in serving in any other community volunteer activities? $\ oxin Yes \ oxin No$											
If yes, please list:		Click									
Interests/Skills/ Areas of Expertise/ Professional Organizations:		Click									
List two professional references below:											
1.	Name: Regina Wood		Daytime Phone:		336-955-2109						
	Address:	711 Coliseum Plaza Court Winston Salem NC 27106									
Relationship: Assistant Director											
2.	Name:	Kim Turner Kendricks	Daytin	ne Phone:	336-955-3988						
	Address:	711 Coliseum Plaza Court Winston Salem NC 27106									
	Relationship:	Director									
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? Yes No											
	If yes, explain.	Click									
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/Commission.											
Sig	gnature of Applicar	Date:	10/28/2024								

PLEASE ATTACH RESUME

RETURN COMPLETED FORM TO:

Mayor's Office, P.O. Box 2511, Winston-Salem, NC 27102 Email: <u>MayorsOffice@CityofWS.org</u> Fax: 336-748-3241 Telephone: 336-727-2058

Note: Applications will be kept on file for two years from the date of application.

Updated 8/3/2021 Page **2** of **2**