Citizen Board and Commission Application

First Name & Middle Initial	N, Joy
Last Name	Rinehart
Gender	Female
Race	White
Birthdate	12/25/1950
Email	jrinehart1970@gmail.com
Phone	864-590-6126
Additional Phone	Field not completed.
Address	2079 Salisbury Square
City	Winston-Salem
State	North Carolina
Zip Code	27127
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	College
School Name/Years Attended	Kent State University
Degree & Subject of Study	Nursing, 1983-1984
	(Section Break)
Applying for Board/Commission (Enter One):	Human Relations Commission
What Board or Commission are you currently serving?	Field not completed.
Why are you interested in serving on that Board/Commission?	I would like to be of service in my new community and learn more about the workings of Winston-Salem.
Are you willing to serve on any other Board/Commission?	Yes
Please List	Field not completed.
Are you interested in serving in any other community volunteer activities?	Yes
Please List	Field not completed.

Interests/Skills/Areas of Expertise/Professional Organizations

Benefits Administration for a local government

(Section Break)		
List Two Professional References		
First Name	Carrie	
Last Name	Parlier-Rinehart	
Address	3847 Idlewild Road	
City	Kernersville	
State	North Carolina	
Zip Code	27284	
Phone	3366871317	
Relationship	Daughter-In-Law	
(Section Break)		
First Name	Keith & Ann	
Last Name	Parlier	
Address	2862 Finch Farm Road	
City	Trinity	
State	North Carolina	

Zip Code	27370
Phone	336-689-0404
Relationship	Friends
	(Section Break)
Affirmation of Eligibility	
Has any formal charge of professional misconduct, criminal misdemeanor, or felony ever been filed against you in any jurisdiction?	No
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	N Joy Rinehart

Date 8/28/2020

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.