

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

SEP 20 2012/

## CITIZEN APPLICATION FOR ADVISORY BOARDS AND COMMISSIONS

Date: 18 Mant 2017
Last Name: 7, Took tald First Name 1
Gender: Male Gremale Race: Black Birthdate: 11/29/21
Email: 50049-1100/e @ hotmaile Com Home Phone: Jame
Daytime Phone: 336. 624. 9078 Cell Phone: 336. 1024 9070
Home Address: 2737 Republes Park Rd #7 12-5710 27107
Live in Winston-Salem City Limits?  \( \text{Yes}  \text{No} \) Live in Forsyth County?  \( \text{Yes}  \text{No} \)
Are you a graduate of the City of Winston-Salem University?   Yes Vo Year
Current Occupation/Title Educative
Employer/Business Name Jonsyth academa
Business Address (with zip code): 5426 Shottalon Q1, W5 MC 27/06
Supervisor's Name: Wandy Barafus, Prucipal
Education:  High School College Waraduate School Cother: 4 19 1
Degree and Subject of Study: AAS Computer Efectionics, BS Management
School Name/Years Attended: Jupo. System, MAT (DPED) 15/2018 2052
Applying for Board/Commission (enter one): What Jand Holkey Coursel
why are you interested in serving Passiprate about health twell nest that on that Board/Commission? What we are about health twell nest that on the control of the control
What Board or Commission are $n/a$ None
you currently serving?  Term Expiration Date:
Are you willing to serve on any other Board/Commission?
If yes, please list: Human Relations on Parks + Receiption
Are you interested in serving in any other community volunteer activities?   Yes
If yes, please list: K-12 Teacher Operalizarin Learning Disabild
Interests/Skills/Areas of Jourdan & Yeutton Wine Hon of Kid Jit
Organizations ( ) 1 1 10 10 10 10 10 10 10 10 10 10 10 10
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Todaled 1/27/16 CC. 2008 Cfg gs Ws Monthly Business North
Certificate Executive deadership for nonprifits 11810
through Blico CRISS Blue Sheald

List two professional references below:			
1.	Name:	On Fran Bates Oates Daytime Phone: 32/2 29/5	
	Address:	601 D. Martin Ruther King by Dr. 475 70. 07115	
	Relationship:	Menton (Projesson School of Education 1554	
2.	Name:	Burndette Lugrose Daytime Phone: 337, 473	
	Address:	Themelds tark ld Ws MC 27107	
	Relationship:	Menton	
AFFIRMATION OF ELIGIBILITY			
Has any formal charge of professional misconduct, criminal misdemeanor, or felony ever been filed against you in any jurisdiction?   Yes			
	If yes, explain.		
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.		
veri to t	rect to the best of a ification of all state or investigated and	lication is public record, and I certify the facts contained in this application are true and my knowledge. I authorize and consent to background checks and to the investigation and ements contained herein. I further authorize all information concerning my qualifications i release all parties from all liability for any damages that may result from this estand and agree any misstatement or conduct will be cause for my removal from any board	
	nature of Applicar lease print and sign		

## PLEASE ATTACH RESUME

## RETURN COMPLETED FORM TO:

Mayor's Office, P.O. Box 2511, Winston-Salem, NC 27102

Website: http://www.CityofWS.org/Government/PublicMeetings

Email: MayorsOffice@CityofWS.org Fax: 336-748-3241 Telephone: 336-727-2058

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

Updated 1/27/16

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