



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

## CITIZEN APPLICATION FOR ADVISORY BOARDS AND COMMISSIONS

								Date:	Date: August 31, 2018			
Last Name: <b>N</b>		leltzer-Holderfield			First Name:		Alann	ına		Middle Initial:	K.	
Gender: ☐ Male ■ Female		F	Race:	ace: Caucasi		ian	Birthdate:		01-15-1983			
Email: alannalou@gmail.			om				Home Phone:		N/A			
Daytime Phone: 336-724		724-284	842 ex. 10		Cell Phone: 3		36-306-4002		2			
Home Address: 421 Beth Avenue												
Live in Winston-Salem City Limits? ■ Yes □ No Live in Forsyth County? ■ Yes □ No												
Are you a graduate of the City of Winston-Salem University? ☐ Yes ■ No Year N/A												
Current Occupation/Title			Operations Manager									
Employer/Business Name				New Winston Museum								
Business A	Business Address (with zip code): 418 N. Marshall Street, Ste. 204, Winston-Salem, NC, 27101								;, 27101			
Supervisor's Name: Dr. Michael Wakeford												
Education: ☐ High School												
Degree and Subject of Study: Bachelor's Degree in Religion with History Minor												
School Name/Years Attended: Salem College, 2008-2013												
Applying for Board/Commission (enter one): Historic Resources Commission												
Why are you interested in serving on that Board/Commission?			I care about Winston-Salem and I am very interested in local history, and involved with this subject matter already through my work since 2014 at New Winston Museum (local community history museum). I would be honored to serve this community through the HRC.									
What Board or Commission are you currently serving?												
you currently serving:			Term Expiration Date:									
Are you willing to serve on any other Board/Commission? ■ Yes □ No												
If yes,	If yes, please list: The HRC is my primary interest, but I would consider other opportunities							rtunities.				
Are you interested in serving in any other community volunteer activities? ■ Yes □ No												
If yes,	If yes, please list: I am open to other opportunities.											
Interests/Skills/Areas of Wember Salem College Alumnae Board of Directors, worked on dozens of New Winston Museum programs relating to history of Wes/Forsyth County, I lead the museum's oral history initiative. I have worked on programming and events with Presérvation Forsyth, W-S African American Archive. Member Association of Visitor Attractions and NC Museums Council. I enjoy doing research, have great interest in preservation of local history and architecture, am personally interested in being involved with/enriching the community. I volunteer in my neighborhood, have previously volunteered at Riverwood Therapeutic Riding Center, and have completed internships at the Moravian Archives and St. Philips Heritage Center in Old Salem.												

List two professional references below:								
1.	Name:	Michelle McCullough	Daytime Phone:	336-414-4543				
	Address:	100 E. First Street P.O. Box 2511 Winston-Salem, NC 27102						
	Relationship:	Colleague we have collaborated on many projects through our respective employers (Michelle: City of W-S, Alanna: New Winston Museum)						
2.	Name:	Milton Rhodes	Daytime Phone:	336-407-0210				
	Address:	219 Tar Branch Court, Winston-Salem, NC 27101						
	Relationship:	He was my former supervisor at New Winston Museum.						
AFFIRMATION OF ELIGIBILITY								
Has any formal charge of professional misconduct, criminal misdemeanor, or felony ever been filed against you in any jurisdiction? ☐ Yes ☐ No								
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.							
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 of Applicant: Alanna Meltzer-Holderfield  (Please print and sign.)  Alanna Meltzer-Holderfield  Date: 8-31-18								

## 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.