

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

## CITIZEN APPLICATION FOR ADVISORY BOARDS AND COMMISSIONS

	Date: _06/24/2020	
Last Name: McRae First Name: Monike	e "Mo" Middle Initial: S	
Gender: ☐ Male 🛛 Female Race: Latinx	Birthdate: 02/02/1990	
Email:monike.mcrae@gmail.com	Home Phone:	
Daytime Phone: Cell Phone:	207-756-4858	
Home Address: 715 S Green St., Winston Salem, NC 27101		
Live in Winston-Salem City Limits?   ✓ Yes □ No	Live in Forsyth County? ☐ Yes ☐ No	
Are you a graduate of City of Winston-Salem University? ☐ Yes ☒ No Year		
Current Occupation/Title: Development Analyst - Real Estate Development		
Employer/Business Name: KCG Development		
Business Address (with zip code):9333 N Meridian St. Suite 230, Indianapolis, IN 46260 _		
Supervisor's Name: Karla Burck		
Education: ☐ High School ☐ College ☒ Graduate School ☐ Other:		
Applying for Board/Commission (enter one): Planning		
Why are you interested in serving on that Board/Commission? Our family moved to WS/FC in 2018; In two short years,		
we have come to love this City and this greater region fiercely. I have a true passion for development and the built environment. I am		
a self proclaimed zoning nerd. I would like to serve on the Planning Board to help WS/FC grow and prospers for generations to come .		
What Board or Commission are you currently serving (if applicable)?	N/A	
To	erm Expiration Date:	
Are you willing to serve on any other Board/Commission? ☒ Yes ☐		
If yes, please list: Affordable Housing Coalition; Housin Authority; BID Advisory Committee		
Are you interested in serving in any other community volunteer activities?   ☐ Yes ☐ No		
If yes, please list:		

Interests/Skills/Areas of Expertise/Professional Organizations:	Affordable Housing Development; Zoning; Financial Analysis	
List two professional references below:		
1. Name: Karla Burck	Daytime Telephone: (317) 218-4025	
Address: 9333 N Meridian St., Suite 230; Indianapolis, IN 46260	)	
Relationship: Supervisor		
2. Name: _Stacy Kaplowitz	Daytime Telephone:(202) 744-1479	
Address: 9333 N Meridian St., Suite 230, Indianapolis, IN 46260		
Relationship:Co-Worker		
AFFIRMATION OF ELIGIBILITY  Has any formal charge of professional misconduct, criminal m in any jurisdiction? ☐ Yes ☒ No  If yes, explain complete disposition	,	
Is there any possible conflict of interest or other matter that we and impartially discharging your duties as an appointee to a Bo If yes, explain.	oard/Commission? □ Yes ☒ No	
I understand this application is public record, and I certify that correct to the best of my knowledge. I authorize and consent to verification of all statements contained herein. I further author to be investigated and release all parties from all liability for a investigation. I understand and agree that any misstatement or board or commission.  Signature of Applicant:  Monike Santana Monike	o background checks and to the investigation and rize all information concerning my qualifications my damages that may result from this conduct will be cause for my removal from any	

## 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.

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