TRANSYLVANIA COUNTY, NC
APPLICATION TO SERVE ON THE
TRANSPORTATION ADVISORY BOARD

We ask you to provide us with the information below that will best assist us in evaluating your application.

Note: When submitted all information on this form becomes public record.

NAME: _________________________________________________________ DATE: ____________

PHYSICAL ADDRESS: _____________________________________________________________

MAILING ADDRESS: ______________________________________________________________

TELEPHONE: ___________________________ EMAIL: ___________________________________

PLACE OF EMPLOYMENT: ________________________________________________________

COUNTY RESIDENT:  Y   N  
A resident is defined as someone who lives in Transylvania County the majority of the year and claims Transylvania County as their domicile for legal purposes.

Voter Registration is a toll the Board of Commissioners uses to determine residency. Are you registered to vote in Transylvania County?  Y   N ; If not, explain.___________________________
________________________________________________________________________________
________________________________________________________________________________

NAME OF BOARD APPLYING FOR: TRANSYLVANIA COUNTY TRANSPORTATION ADVISORY BOARD

PREVIOUS COMMITTEE/BOARD AND/OR LEADERSHIP EXPERIENCE (INCLUDE ANY COUNTY, CITY, NON-PROFIT OR EMPLOYMENT RELATED LEADERSHIP POSITIONS OR BOARDS/COMMITTEE YOU HAVE SERVED ON AS A MEMBER OR CHAIR)
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

COMMUNITY INVOLVEMENT:
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

WHAT EXPERIENCE, TRAINING OR QUALIFICATIONS DO YOU HAVE THAT WOULD BE HELPFUL SERVING ON THIS BOARD?
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
WHY DO YOU WANT TO BE A MEMBER OF THIS BOARD AND HOW DO YOU FEEL YOU COULD CONTRIBUTE TO THE OVERALL BOARD?

___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

WHAT COMMUNITY TOPICS CONCERN YOU THAT RELATE TO THIS BOARD?

___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

THE BOARD MAY MEET IN THE MORNING, AFTERNOON OR EVENING HOURS. WHAT LIMITATIONS DO YOU HAVE FOR ATTENDING MEETINGS?

___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

HOW DID YOU FIND OUT ABOUT THIS BOARD? (PLEASE CIRCLE ONE)

NEWSPAPER, EMAIL, FRIEND, TV, INTERNET, CURRENT MEMBER, BROCHURE, POSTER, RADIO, SPEAKER AT EVENT, OTHER

___________________________________________________________________________________

SIGNATURE __________________________ DATE ________________

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