

Print

**Advisory Board Chair Report (Complete One Per Applicant) - Submission #4595**

Date Submitted: 2/27/2020

Applicant First Name:\*

Ben

Applicant Last Name:

Berolzheimer

Advisory Board Name:\*

Planning Board

Chair Name\*

Catherine Fray

1. Has the applicant previously served on this or another advisory board?\*

- Yes
- No

2. If yes, how many total years have they served?

This should be available on the application or by asking the applicant.

3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?

- Yes (Skip to Last Question)
- No

4. Is the applicant already serving on this advisory board and completed their two full terms?

- Yes
- No

5. Is the applicant applying for a special or expert seat on the advisory board?\*

- Yes
- No

6. If yes, which seat?

**7. Did the applicant attend an advisory board meeting?\***

Yes  
 No

**8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?**

Yes  
 No

**9. Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on the advisory board:**

Yes  
 No

**10. If no, briefly explain:**

**11. In addition to your comments above, please check other qualities that the applicant offers that would help the Advisory Board meet its goals for community representation. Please note that candidates who do not meet any of these qualities are still eligible for appointment. Please communicate any urgent needs and priorities for Advisory Board composition to your Town Council liaison.**

Diversity  
 Occupation, Experience, or Special Skills  
 Other

**If other, please explain:**

**Print**

# Advisory Board Application - Submission #3748

Date Submitted: 2/25/2019

**First Name\***

Ben

**Last Name\***

Berolzheimer

**Date\***

2/25/2019

Select today's date

**Address1\***

108 W Poplar Ave

**Address2**

**City\***

Carrboro

**State**

NC

**Zip\***

27510

**Is this address located within the corporate limits of the Town of Carrboro?\***

Yes

**Is this address located within the Town's ETJ, Planning Jurisdiction, or Northern Transition Area?\***

No

Please select Yes or No.

**Telephone\***

9193577029

Please enter your primary contact phone number.

**Email Address\***

bberolz90@gmail.com

Enter your primary email address.

**Date of Birth\***

12/15/1990

Please enter your Month/Day/Year of Birth

**Race\***

white

Please enter your race.

**Sex\***

male

Please enter your sex.

**Occupation\***

Student and Research Fellow

Please enter your occupation.

**Are you a registered Orange County Voter?\***

Yes

Please answer Yes or No

**Length of Residence in Orange County\***

27 years

How long have you been a resident of Orange County?

**Length of Residence in the Town of Carrboro\***

8 years

How long have you been a resident of the Town of Carrboro?

I wish to be considered for appointment to the following committee/board(s) (Select no more than two (2)):

- |                                     |  |                                     |  |
|-------------------------------------|--|-------------------------------------|--|
| <input type="checkbox"/>            | Affordable Housing Advisory Commission | <input type="checkbox"/>            | Northern Transition Area Advisory Committee    |
| <input type="checkbox"/>            | Animal Control Board of Appeals        | <input type="checkbox"/>            | OWASA Board of Directors                       |
| <input type="checkbox"/>            | Appearance Commission/NPDC             | <input checked="" type="checkbox"/> | Planning Board                                 |
| <input type="checkbox"/>            | Arts Committee                         | <input type="checkbox"/>            | Recreation and Parks Commission                |
| <input type="checkbox"/>            | Board of Adjustment                    | <input type="checkbox"/>            | Safe Routes to School Implementation Committee |
| <input type="checkbox"/>            | Economic Sustainability Commission     | <input type="checkbox"/>            | Stormwater Advisory Commission                 |
| <input checked="" type="checkbox"/> | Environmental Advisory Board           | <input type="checkbox"/>            | Tourism Development Authority*                 |
| <input type="checkbox"/>            | Human Services Commission              | <input type="checkbox"/>            | Transportation Advisory Board                  |
| <input type="checkbox"/>            | Greenways Commission                   |                                     |  |

Please note that membership is limited to one advisory board at a time. You shall not be considered for appointment to another board unless you resign before filing an application or you are in the last six months of your current term.

**Other (advisory board not listed):**

\_\_\_\_\_

Please indicate by typing the advisory board that you are applying for.

**Advisory Board Preference\***

Planning

If you are applying for membership on more than one advisory board, please indicate your preference by typing your first choice. Please limit your selection to two boards).

**\*Employer/Self Employed**

Environmental Protection Agency

Please enter your employment information. This is a requirement for application for the Tourism Development Authority.

**Number of Years Employed\***

5

Enter the number of years you have been employed at the organization listed to the left.

**\* Provide examples of how you are involved in the promotion of travel and tourism in the Town of Carrboro.**

n/a

\*\*Required only for the Tourism Development Authority Application.\*\*

**Community Activities/Organizational Memberships\***

Participation in public meetings and other sporadic volunteering. I am applying because I want to be more involved

Please enter the requested information.

**Experience to the Town in Working on Advisory Boards**

B.S. from Appalachian State in Sustainable Development (specifically community development) gave me the knowledge and passion for working in a field that promotes environmental, economic, and equitable sustainability. Following undergrad I got a job at the Environmental Protection Agency working for the Sustainable and Healthy Communities Research Program which conducts community-based research to empower communities in making more informed and holistic decisions resulting in positive outcomes for both humans and the Environment. Through this position i was able to see countless examples of community case studies that were putting our research and tools into action to achieve better outcomes. The desire to be a part of some of these great community based solutions led me to the decision to go back to school to pursue a masters degree in city and regional planning at UNC-CH. Now in my second semester at UNC's department of city and regional planning, I am fully immersed in all things planning related. From dispute resolution, to land use and environmental planning to, development management, to real estate investment and affordable housing. I am living and breathing planning and hope to join Carrboro's planning board to learn more and hopefully make a positive impact. Summary Personal Statement: I am currently a 2020 masters candidate for a degree in city and regional planning. I am a systems thinker with a love for the outdoors and an educational underpinning in sustainable development. I have nearly 5 years of experience working at the intersection of environmental public health and community-based research. I am passionate about urban planning and resilience, the remediation, restoration, and revitalization of underused or contaminated sites, helping communities understand the full implications of their decisions, and environmental justice and equity. I have experience and expertise in research planning, working in and leading teams, project management, stakeholder engagement, building partnerships, dispute resolution, communications and marketing and planning and facilitating meetings and workshops.

**Reasons You Wish to be Appointed\***

There is a good chance I spend the rest of my life in this area and I want to be a part of helping to create and shape a future that supports all of Carrboro's citizens, both current and future. Having spent my entire life in the Carrboro/Chapel Hill area I feel that I have gained a deep understanding of community values and want to help to make sure those values are incorporated into local government decisions. I feel it is part of my civic duty to lend my knowledge and expertise to the town to help guide and recommend changes that will support the common public interest. I am passionate about I am also interested in learning more about local government functions and procedures.

**Have you ever served on any Town of Carrboro Committee or Board?\***

**If yes, which one(s)?**

\_\_\_\_\_

No

**Are you currently serving on a Town Board or Committee?\***

- Yes
- No

**If yes, are you applying for a third consecutive term?\***

- Yes
- No

**If yes, please describe how you meet one, or more, of the following exceptions noted below. \***

n/a

After completing two full terms, a member must take off one year before applying for re-appointment to the same advisory board. However, a board member may apply to serve on another advisory board if he/she desires. The Board of Aldermen may make exceptions to this rule under the following circumstances: 1. To retain diversity on an advisory board; 2. A lack of applicants.

Print

**Advisory Board Chair Report (Complete One Per Applicant) - Submission #4606**

**Date Submitted: 2/27/2020**

**Applicant First Name:\***

Catherine

**Applicant Last Name:**

Fray

**Advisory Board Name:\***

Planning Board

**Chair Name\***

Catherine Fray

**1. Has the applicant previously served on this or another advisory board?\***

Yes

No

**2. If yes, how many total years have they served?**

7

This should be available on the application or by asking the applicant.

**3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?**

Yes (Skip to Last Question)

No

**4. Is the applicant already serving on this advisory board and completed their two full terms?**

Yes

No

**5. Is the applicant applying for a special or expert seat on the advisory board?\***

Yes

No

**6. If yes, which seat?**

**7. Did the applicant attend an advisory board meeting?\***

Yes  
 No

**8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?**

Yes  
 No

**9. Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on the advisory board:**

Yes  
 No

**10. If no, briefly explain:**

**11. In addition to your comments above, please check other qualities that the applicant offers that would help the Advisory Board meet its goals for community representation. Please note that candidates who do not meet any of these qualities are still eligible for appointment. Please communicate any urgent needs and priorities for Advisory Board composition to your Town Council liaison.**

Diversity  
 Occupation, Experience, or Special Skills  
 Other

**If other, please explain:**

# Advisory Board Application - Submission #4594

Date Submitted: 2/27/2020

**First Name\***

Catherine

**Last Name\***

Fray

**Date\***

2/27/2020

Select today's date

**Address1\***

116 Alabama Avenue

**Address2**

**City\***

Carrboro

**State**

North Carolina

**Zip\***

27510

**Is this address located within the corporate limits of the Town of Carrboro?\***

Yes

Please select Yes or No.

**Is this address located within the Town's ETJ, Planning Jurisdiction, or Northern Transition Area?\***

No

**Telephone\***

3362077453

Please enter your primary contact phone number.

**Email Address\***

cadamson@alumni.unc.edu

Enter your primary email address.

**The demographic information provided below is of interest because your elected officials want the Town's advisory boards to reflect the diversity of the Town. Diversity of the applicant pool is a priority of the Board.**

**Date of Birth\***

5/26/1986

Please enter your Month/Day/Year of Birth

**Race\***

White

Please enter your race.

**Sex\***

Nonbinary

Please enter your sex.

**Occupation\***

IT Consultant

Please enter your occupation.

**Are you a registered Orange County Voter?\***

Yes

Please answer Yes or No

**Length of Residence in Orange County\***

10 years

How long have you been a resident of Orange County?

**Length of Residence in the Town of Carrboro\***

10 years

How long have you been a resident of the Town of Carrboro?



I wish to be considered for appointment to the following committee/board(s) (Select no more than two (2)):

- |   |   |
|---|---|
| <input type="checkbox"/> Affordable Housing Advisory Commission | <input type="checkbox"/> Northern Transition Area Advisory Committee    |
| <input type="checkbox"/> Animal Control Board of Appeals        | <input type="checkbox"/> OWASA Board of Directors                       |
| <input type="checkbox"/> Appearance Commission/NPDC             | <input checked="" type="checkbox"/> Planning Board                      |
| <input type="checkbox"/> Arts Committee                         | <input type="checkbox"/> Recreation and Parks Commission                |
| <input type="checkbox"/> Board of Adjustment                    | <input type="checkbox"/> Safe Routes to School Implementation Committee |
| <input type="checkbox"/> Economic Sustainability Commission     | <input type="checkbox"/> Stormwater Advisory Commission                 |
| <input type="checkbox"/> Environmental Advisory Board           | <input type="checkbox"/> Tourism Development Authority*                 |
| <input type="checkbox"/> Human Services Commission              | <input checked="" type="checkbox"/> Transportation Advisory Board       |
| <input type="checkbox"/> Greenways Commission                   |   |

Please note that membership is limited to one advisory board at a time. You shall not be considered for appointment to another board unless you resign before filing an application or you are in the last six months of your current term.

**Other (advisory board not listed):**

\_\_\_\_\_

Please indicate by typing the advisory board that you are applying for.

**Advisory Board Preference\***

Planning Board

If you are applying for membership on more than one advisory board, please indicate your preference by typing your first choice. Please limit your selection to two boards).

**\*Employer/Self Employed**

360 Cloud Solutions

Please enter your employment information. This is a requirement for application for the Tourism Development Authority.

**Number of Years Employed\***

1

Enter the number of years you have been employed at the organization listed to the left.

**\* Provide examples of how you are involved in the promotion of travel and tourism in the Town of Carrboro.**

\_\_\_\_\_

\*\*Required only for the Tourism Development Authority Application.\*\*

**Community Activities/Organizational Memberships\***

Planning Board is my primary community activity.

Please enter the requested information.

**Relevant Experience:**

I've served on the planning board for 7 years, during which time I have been chair for 3 terms.

Ever since I heard that the town was going to engage in a comprehensive plan, I have wanted to take part as a member of the Planning Board. The board has seen a constant stream of projects shrunk, altered in character, turned into local controversies, deferred or cancelled over the last few years. In my opinion, the lack of a comprehensive plan and the lack of strong connections between the previous Vision 2020 plan and the LUO are a primary cause of the town's planning difficulties. Developers are left feeling like the rules are not consistent and that they and the town council are strong-armed by small neighborhood groups. Neighbors are left feeling their concerns are not heard and remain worried about future development even when they "win". The town council feels caught in between its own rules and its citizens. The town as a whole loses by having incoherent development that does not meet its goals or serve its values. I have had the opportunity to observe this repeatedly and up close and I believe my experience would be valuable during the comprehensive plan process. Two years ago, I considered resigning during my previous term and reapplying when the plan process drew near. Due to the continuing uncertainty over when the comprehensive plan process would begin, I opted to wait, but with repeated delays in the start of the process my term has instead run out. I have also considered not applying for a third term. However, I believe that the next 18 months will be a pivot point in Carrboro's history as a polity and a planning jurisdiction. It is for this reason that I am applying for a third consecutive term. I believe that I can contribute as a member of the Planning Board far beyond what I could contribute through participating in a survey or charette.

**Have you ever served on any Town of Carrboro Committee or Board?\***

**If yes, which one(s)?**

Planning Board

Yes

**Are you currently serving on a Town Board or Committee?\***



Yes



No

**If yes, are you applying for a third consecutive term?\***



Yes



No

**If yes, please describe how you meet one, or more, of the following exceptions noted below. \***

There are a couple of ways in which I would assist the Town Council in retaining diversity on the Advisory Board. The first is that I am an LGBTQ person - nonbinary and qu\*\*r. (FYI, this form has a filter set to reject submissions which contain the name of my sexual orientation as "inappropriate". Frankly I think that underscores my point.) While I am not the only such member currently, Andrew is expecting to leave the board due to the end of his second term. I have no information on any current applicants. I found my diversity helpful to the Board at least once before, during discussions of the definition of "family" and "related" with regard to proposed ordinances. The second is geographic. Half of the likely remaining board members represent the ETJs, and many of the current applicants reside in more outlying suburban areas of Carrboro. I have worked hard over the years to keep the interests of those living in denser, more economically diverse neighborhoods near downtown in focus. The third is by duration of experience with Carrboro's planning process. Due to recent resignations and a confluence of term limits, there are only 4 board members who may be expected to remain. Of those, 3 have multiple decades of experience with Town governance and the Planning Board. I am concerned that the Planning Board may struggle to participate fully in the comprehensive plan process with a few "lifers" and a majority of members being brand new not only to the Planning Board but to any Town Board or Committee.

After completing two full terms, a member must take off one year before applying for re-appointment to the same advisory board. However, a board member may apply to serve on another advisory board if he/she desires. The Board of Aldermen may make exceptions to this rule under the following circumstances: 1. To retain diversity on an advisory board; 2. A lack of applicants.

Print

Advisory Board Chair Report (Complete One Per Applicant) - Submission #4597

Date Submitted: 2/27/2020

Applicant First Name:\*

Kirsten

Applicant Last Name:

Leloudis

Advisory Board Name:\*

Planning Board

Chair Name\*

Catherine Fray

1. Has the applicant previously served on this or another advisory board?\*

Yes

No

2. If yes, how many total years have they served?

This should be available on the application or by asking the applicant.

3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?

Yes (Skip to Last Question)

No

4. Is the applicant already serving on this advisory board and completed their two full terms?

Yes

No

5. Is the applicant applying for a special or expert seat on the advisory board?\*

Yes

No

6. If yes, which seat?

7. Did the applicant attend an advisory board meeting?\*

Yes

No

8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?

Yes

No

9. Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on the advisory board:

Yes

No

10. If no, briefly explain:

11. In addition to your comments above, please check other qualities that the applicant offers that would help the Advisory Board meet its goals for community representation. Please note that candidates who do not meet any of these qualities are still eligible for appointment. Please communicate any urgent needs and priorities for Advisory Board composition to your Town Council liaison.

Diversity

Occupation, Experience, or Special Skills

Other

If other, please explain:

**Print**

**Advisory Board Application - Submission #4432**

Date Submitted: 12/11/2019

**First Name\***

Kirsten

**Last Name\***

Leloudis

**Date\***

12/11/2019

Select today's date

**Address1\***

142 BPW Club Road

**Address2**

Apt. F22

**City\***

Carrboro

**State**

North Carolina

**Zip\***

27510

**Is this address located within the corporate limits of the Town of Carrboro?\***

Yes

Please select Yes or No.

**Is this address located within the Town's ETJ, Planning Jurisdiction, or Northern Transition Area?\***

No

**Telephone\***

919-270-13

Please enter your primary contact phone number.

**Email Address\***

kirstenleloudis@gmail.com

Enter your primary email address.

**The demographic information provided below is of interest because your elected officials want the Town's advisory boards to reflect the diversity of the Town. Diversity of the applicant pool is a priority of the Board.**

**Date of Birth\***

11/1/1991

Please enter your Month/Day/Year of Birth

**Race\***

White

Please enter your race.

**Sex\***

Female

Please enter your sex.

**Occupation\***

Attorney

Please enter your occupation.

**Are you a registered Orange County Voter?\***

Yes

Please answer Yes or No

**Length of Residence in Orange County\***

22 years

How long have you been a resident of Orange County?

**Length of Residence in the Town of Carrboro\***

15 years

How long have you been a resident of the Town of Carrboro?

**I wish to be considered for appointment to the following committee/board(s) (Select no more than two (2)):**\*

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Affordable Housing Advisory Commission | <input type="checkbox"/> Northern Transition Area Advisory Committee    |
| <input type="checkbox"/> Animal Control Board of Appeals                   | <input type="checkbox"/> OWASA Board of Directors                       |
| <input type="checkbox"/> Appearance Commission/NPDC                        | <input type="checkbox"/> Planning Board                                 |
| <input type="checkbox"/> Arts Committee                                    | <input type="checkbox"/> Recreation and Parks Commission                |
| <input type="checkbox"/> Board of Adjustment                               | <input type="checkbox"/> Safe Routes to School Implementation Committee |
| <input type="checkbox"/> Economic Sustainability Commission                | <input type="checkbox"/> Stormwater Advisory Commission                 |
| <input type="checkbox"/> Environmental Advisory Board                      | <input type="checkbox"/> Tourism Development Authority*                 |
| <input type="checkbox"/> Human Services Commission                         | <input type="checkbox"/> Transportation Advisory Board                  |
| <input type="checkbox"/> Greenways Commission                              |   |

Please note that membership is limited to one advisory board at a time. You shall not be considered for appointment to another board unless you resign before filing an application or you are in the last six months of your current term.

**Other (advisory board not listed):**

\_\_\_\_\_

Please indicate by typing the advisory board that you are applying for.

**Advisory Board Preference\***

Affordable Housing Advisory Commission

If you are applying for membership on more than one advisory board, please indicate your preference by typing your first choice. Please limit your selection to two boards).

**\*Employer/Self Employed**

North Carolina Department of Health and Human Services,  
Division of Public Health, Office of Regulatory and Legal  
Affairs

Please enter your employment information. This is a requirement for application for the Tourism Development Authority.

**Number of Years Employed\***

0 years, 3.5 months

Enter the number of years you have been employed at the organization listed to the left.

**\* Provide examples of how you are involved in the promotion of travel and tourism in the Town of Carrboro.**

\_\_\_\_\_

\*\*Required only for the Tourism Development Authority Application.\*\*

**Community Activities/Organizational Memberships\***

I currently serve on the statewide steering committee of the North Carolina Chapter of the National Lawyers' Guild (NLG), a progressive voluntary professional association for attorneys and legal workers. My work with the NLG has involved training local law students to serve as legal observers and helping to organize the 2019 national convention, which we successfully petitioned to have held in North Carolina this year. I am also a volunteer with Legal Aid of North Carolina, a non-profit law firm that provides free legal help to low-income clients. In my role as a volunteer, I provide free legal assistance to low-income individuals and families in advice-only (non-litigation) cases related to subsidized housing law, eviction prevention, and tenants' rights to safe and habitable housing. I have been a member-owner of Weaver Street Market Coop for the past 6 years. In the past, I have also served as a HIV clinic manager at the SHAC free clinic located on Lloyd Street in Carrboro; served a one-year term on the North Carolina Coalition Against Domestic Violence Board of Directors; volunteered at the Carrboro Farmers Market's annual Harvest Dinner; and worked in many of Carrboro's restaurants, including Acme Food & Beverage Company and Milltown.

Please enter the requested information.

**Relevant Experience:\***

I am a recent graduate of UNC School of Law and the UNC Gillings School of Global Public Health, where I earned my Juris Doctor and my Master's in Public Health, respectively. My first job out of school was with Legal Aid of North Carolina, where I served worked as a staff attorney representing low-income clients in cases involving domestic violence, loss of public benefits (SNAP, WIC, Medicaid, SSI, etc.), disaster relief, and educational access for children with disabilities. The largest part of my practice, however- and the work that I felt and continue to feel deeply passionate about- was housing law. That work gave me experience working on issues related to deeds, land use, local housing codes, subsidized housing (project-based Section 8, Section 8 housing choice voucher, public housing, rural development, LIHTC, etc.), eviction defense, accessibility for people with disabilities, the intersection of domestic violence and housing, habitability and housing conditions, and more. In addition to knowing the state and federal law that is relevant to affordable housing, I have also seen first-hand how affordable housing policies actually play out, for better or for worse, in people's lives. I believe that knowledge and experience makes me well-equipped to help contribute to affordable housing efforts and advocate for affordable housing initiatives that best serve our Carrboro community. I also have a Master's degree in public health and currently work as a public health attorney with the North Carolina Division of Public Health. That experience allows me to bring an additional lens to affordable housing work, as well as familiarity with relevant concepts, like how the built environment informs health outcomes. While I was a public health graduate student, I was also awarded small grants to support my attendance at trainings held by the Racial Equity Institute. I have completed both the Phase I and Phase II Anti-Racism training workshops, and continue to return to Phase I trainings as an "alumni" to further develop my learning and toolbox for anti-racist work. I will bring my commitment to anti-poverty and anti-racist work, my experience with affordable housing law and policy, my love of public service, my interpersonal skills, and my grit to my work as a member of the Affordable Housing Advisory Commission.

**Reasons You Wish to be Appointed\***

I am born and raised in Carrboro, North Carolina. My family briefly lived in Chapel Hill during my teenage years, and I moved away to Indiana to attend college and then to Greenville, NC, for the first six months of my law career- but I have always considered Carrboro my home base, and Carrboro is where I intend to permanently settle and raise my family. Beyond caring about my friends, family, and favorite local businesses here in Carrboro, I am also personally invested in Carrboro's future. In recent years, Carrboro has taken up the phrase "It's Carrboro- Feel Free"- words that resonate with my own experience of this town, which strives to be a place where justice, equity, and joy are valued and achieved. Data shows us that each year, thousands of people move to the Triangle area and Carrboro certainly feels the effects of that. As Carrboro continues to grow and change it will be important to preserve what makes this town so special and what makes this town a place where people of many backgrounds and experiences can come to "Feel Free." Specifically, it will be necessary for there be adequate affordable housing options in Carrboro so that our friends, neighbors, and colleagues aren't priced out of being part of this community. I love this town and I want to be part of that work, and I believe I have the skills, training, and experience to make meaningful contributions as a member of the Affordable Housing Advisory Commission.

**Have you ever served on any Town of Carrboro Committee or Board?\***

**If yes, which one(s)?**

\_\_\_\_\_

No

**Are you currently serving on a Town Board or Committee?\***

Yes

No

**If yes, are you applying for a third consecutive term?\***

Yes

No

**If yes, please describe how you meet one, or more, of the following exceptions noted below. \***

Not applicable.

After completing two full terms, a member must take off one year before applying for re-appointment to the same advisory board. However, a board member may apply to serve on another advisory board if he/she desires. The Board of Aldermen may make exceptions to this rule under the following circumstances: 1. To retain diversity on an advisory board; 2. A lack of applicants.



Print

**Advisory Board Chair Report (Complete One Per Applicant) - Submission #4600**

Date Submitted: 2/27/2020

Applicant First Name:\*

Elmira

Applicant Last Name:

Mangum

Advisory Board Name:\*

Planning Board

Chair Name\*

Catherine Fray

1. Has the applicant previously served on this or another advisory board?\*

Yes

No

2. If yes, how many total years have they served?

This should be available on the application or by asking the applicant.

3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?

Yes (Skip to Last Question)

No

4. Is the applicant already serving on this advisory board and completed their two full terms?

Yes

No

5. Is the applicant applying for a special or expert seat on the advisory board?\*

Yes

No

6. If yes, which seat?

**7. Did the applicant attend an advisory board meeting?\***

Yes

No

**8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?**

Yes

No

**9. Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on the advisory board:**

Yes

No

**10. If no, briefly explain:**

**11. In addition to your comments above, please check other qualities that the applicant offers that would help the Advisory Board meet its goals for community representation. Please note that candidates who do not meet any of these qualities are still eligible for appointment. Please communicate any urgent needs and priorities for Advisory Board composition to your Town Council liaison.**

Diversity

Occupation, Experience, or Special Skills

Other

**If other, please explain:**

# Print

## Advisory Board Application - Submission #4442

Date Submitted: 12/18/2019

First Name\*

Elmira

Last Name\*

Mangum

Date\*

12/18/2019

Select today's date

Address1\*

102 Rivercreek Place

Address2

City\*

Carrboro

State

NC

Zip\*

27510

Is this address located within the corporate limits of the Town of Carrboro?\*

Yes

Please select Yes or No.

Is this address located within the Town's ETJ, Planning Jurisdiction, or Northern Transition Area?\*

Planning Jurisdiction

Telephone\*

9193603035

Please enter your primary contact phone number.

Email Address\*

emangum61@gmail.com

Enter your primary email address.

The demographic information provided below is of interest because your elected officials want the Town's advisory boards to reflect the diversity of the Town. Diversity of the applicant pool is a priority of the Board.

Date of Birth\*

4/10/1963

Please enter your Month/Day/Year of Birth

Race\*

African-American

Please enter your race.

Sex\*

Female

Please enter your sex.

Occupation\*

Retired

Please enter your occupation.

Are you a registered Orange County Voter?\*

No

Please answer Yes or No

Length of Residence in Orange County\*

20 years off and on

How long have you been a resident of Orange County?

Length of Residence in the Town of Carrboro\*

20 years off and on

How long have you been a resident of the Town of Carrboro?

I wish to be considered for appointment to the following committee/board(s) (Select no more than two (2)):

- |                                     |  |                                     |  |
|-------------------------------------|--|-------------------------------------|--|
| <input type="checkbox"/>            | Affordable Housing Advisory Commission | <input type="checkbox"/>            | Northern Transition Area Advisory Committee    |
| <input type="checkbox"/>            | Animal Control Board of Appeals        | <input type="checkbox"/>            | OWASA Board of Directors                       |
| <input type="checkbox"/>            | Appearance Commission/NPDC             | <input checked="" type="checkbox"/> | Planning Board                                 |
| <input type="checkbox"/>            | Arts Committee                         | <input type="checkbox"/>            | Recreation and Parks Commission                |
| <input type="checkbox"/>            | Board of Adjustment                    | <input type="checkbox"/>            | Safe Routes to School Implementation Committee |
| <input checked="" type="checkbox"/> | Economic Sustainability Commission     | <input type="checkbox"/>            | Stormwater Advisory Commission                 |
| <input type="checkbox"/>            | Environmental Advisory Board           | <input type="checkbox"/>            | Tourism Development Authority*                 |
| <input type="checkbox"/>            | Human Services Commission              | <input type="checkbox"/>            | Transportation Advisory Board                  |
| <input type="checkbox"/>            | Greenways Commission                   |                                     |  |

Please note that membership is limited to one advisory board at a time. You shall not be considered for appointment to another board unless you resign before filing an application or you are in the last six months of your current term.

**Other (advisory board not listed):**

Please indicate by typing the advisory board that you are applying for.

**Advisory Board Preference\***

If you are applying for membership on more than one advisory board, please indicate your preference by typing your first choice. Please limit your selection to two boards).

**\*Employer/Self Employed**

Please enter your employment information. This is a requirement for application for the Tourism Development Authority.

**Number of Years Employed\***

Enter the number of years you have been employed at the organization listed to the left.

**\* Provide examples of how you are involved in the promotion of travel and tourism in the Town of Carrboro.**

\*\*Required only for the Tourism Development Authority Application.\*\*

**Community Activities/Organizational Memberships\***

Please enter the requested information.

**Relevant Experience:\***

Former VP for Planning and Budget at Cornell University Former Senior Associate Provost for Planning and Budget at UNC Chapel Hill COMMITTEE EXPERIENCE & PUBLIC SERVICE - OVER 30 YEARS U. S. Department of Agriculture - Agricultural Policy Advisory Committee for Trade Sponsor, Space Management and Implementation Committee Sponsor, Human Resource Implementation System Tallahassee Economic Development Council, United Way Board of Directors " Tompkins County, Tompkins County Library Board, Higher Education Resource Services Board (HERS), Tri State Diversity Council Budget Construction and Campus Space Study, American Association of University Women, Capital Projects Finance Subcommittee, Child Care Advisory Committee, Classroom Planning Committee, Enrollment Policy Advisory Committee, Chair, Enterprise Applications Planning Committee and Work Group Enterprise Risk Management Committee, Facilities and Administrative Cost Study Team Finance Advisory Council Five-Year Financial Planning Committee, Chair, UNC Intercity Visit to Madison, Wisconsin, Personnel Flexibility Committee, President, Orange County Rape Crisis Center Board of Directors, UNC Property Committee, Strategic Planning Committee, UNC System President's Committee on Efficiency & Effectiveness (PACE), Member, President's Task force on Race and Diversity, Member, Program Planning Committee, ACE/NIP Program Planning Committee, President, Western New York Pan-Hellenic Council Chair, Management Information and Decision Support Systems Committee, Member, United Way Needs Assessment Board Erie County Development Coordination Board, Girl Scout Leader, Buffalo & Erie County COMMUNITY INVOLVEMENT Tallahassee Urban League Tiger Bay Club Oasis Center for Girls Meals on Wheels EmPOWERment, Brookfield at Berryhill Homeowners Association Board Carolina Leadership Development Mentor Chapel Hill/Carrboro Downtown Partnership Families Helping Families High School Reform Committee Carrboro/Chapel Hill School Board Minority Achievement Committee National Council of Negro Women, Life Member, School Improvement Team, Carrboro/Chapel Hill School Board Chapel Hill-Carrboro NAACP, Chapel Hill Youth Creating Change, Zeta Phi Beta Sorority, Inc.

**Reasons You Wish to be Appointed\***

Provide service, engagement, and expertise as part of my Civic duty.

**Have you ever served on any Town of Carrboro Committee or Board?\***

**If yes, which one(s)?**

\_\_\_\_\_

No

**Are you currently serving on a Town Board or Committee?\***

Yes

No

**If yes, are you applying for a third consecutive term?\***

Yes

No

**If yes, please describe how you meet one, or more, of the following exceptions noted below. \***

The answer is no to both questions but the form will not process without an entry.

After completing two full terms, a member must take off one year before applying for re-appointment to the same advisory board. However, a board member may apply to serve on another advisory board if he/she desires. The Board of Aldermen may make exceptions to this rule under the following circumstances: 1. To retain diversity on an advisory board; 2. A lack of applicants.

Print

**Advisory Board Chair Report (Complete One Per Applicant) - Submission #4603**

Date Submitted: 2/27/2020

Applicant First Name:\*

Peter

Applicant Last Name:

Matischak

Advisory Board Name:\*

Planning Board

Chair Name\*

Catherine Fray

1. Has the applicant previously served on this or another advisory board?\*

Yes

No

2. If yes, how many total years have they served?

This should be available on the application or by asking the applicant.

3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?

Yes (Skip to Last Question)

No

4. Is the applicant already serving on this advisory board and completed their two full terms?

Yes

No

5. Is the applicant applying for a special or expert seat on the advisory board?\*

Yes

No

6. If yes, which seat?

**7. Did the applicant attend an advisory board meeting?\***

Yes

No

**8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?**

Yes

No

**9. Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on the advisory board:**

Yes

No

**10. If no, briefly explain:**

**11. In addition to your comments above, please check other qualities that the applicant offers that would help the Advisory Board meet its goals for community representation. Please note that candidates who do not meet any of these qualities are still eligible for appointment. Please communicate any urgent needs and priorities for Advisory Board composition to your Town Council liaison.**

Diversity

Occupation, Experience, or Special Skills

Other

**If other, please explain:**

**Print**

# Advisory Board Application - Submission #4485

Date Submitted: 1/9/2020

**First Name\***

Peter

**Last Name\***

Matischak

**Date\***

2/19/1964

Select today's date

**Address1\***

111 Lisa Drive

**Address2**

**City\***

Carrboro

**State**

nc

**Zip\***

27510

**Is this address located within the corporate limits of the Town of Carrboro?\***

Yes

Please select Yes or No.

**Is this address located within the Town's ETJ, Planning Jurisdiction, or Northern Transition Area?\***

No

**Telephone\***

9849998408

Please enter your primary contact phone number.

**Email Address\***

pmatischak@gmail.com

Enter your primary email address.

The demographic information provided below is of interest because your elected officials want the Town's advisory boards to reflect the diversity of the Town. Diversity of the applicant pool is a priority of the Board.

**Date of Birth\***

2/19/1964

Please enter your Month/Day/Year of Birth

**Race\***

white

Please enter your race.

**Sex\***

male

Please enter your sex.

**Occupation\***

rates specialist

Please enter your occupation.

**Are you a registered Orange County Voter?\***

Yes

Please answer Yes or No

**Length of Residence in Orange County\***

23 years

How long have you been a resident of Orange County?

**Length of Residence in the Town of Carrboro\***

23 years

How long have you been a resident of the Town of Carrboro?



I wish to be considered for appointment to the following committee/board(s) (Select no more than two (2)):

- |   |   |
|---|---|
| <input type="checkbox"/> Affordable Housing Advisory Commission | <input type="checkbox"/> Northern Transition Area Advisory Committee    |
| <input type="checkbox"/> Animal Control Board of Appeals        | <input type="checkbox"/> OWASA Board of Directors                       |
| <input type="checkbox"/> Appearance Commission/NPDC             | <input checked="" type="checkbox"/> Planning Board                      |
| <input type="checkbox"/> Arts Committee                         | <input type="checkbox"/> Recreation and Parks Commission                |
| <input type="checkbox"/> Board of Adjustment                    | <input type="checkbox"/> Safe Routes to School Implementation Committee |
| <input type="checkbox"/> Economic Sustainability Commission     | <input type="checkbox"/> Stormwater Advisory Commission                 |
| <input type="checkbox"/> Environmental Advisory Board           | <input type="checkbox"/> Tourism Development Authority*                 |
| <input type="checkbox"/> Human Services Commission              | <input type="checkbox"/> Transportation Advisory Board                  |
| <input type="checkbox"/> Greenways Commission                   |   |

Please note that membership is limited to one advisory board at a time. You shall not be considered for appointment to another board unless you resign before filing an application or you are in the last six months of your current term.

**Other (advisory board not listed):**

planning board

Please indicate by typing the advisory board that you are applying for.

**Advisory Board Preference\***

planning board

If you are applying for membership on more than one advisory board, please indicate your preference by typing your first choice. Please limit your selection to two boards).

**\*Employer/Self Employed**

Clover International

Please enter your employment information. This is a requirement for application for the Tourism Development Authority.

**Number of Years Employed\***

2 years

Enter the number of years you have been employed at the organization listed to the left.

**\* Provide examples of how you are involved in the promotion of travel and tourism in the Town of Carrboro.**

\*\*Required only for the Tourism Development Authority Application.\*\*

**Community Activities/Organizational Memberships\***

none

Please enter the requested information.

**Relevant Experience:\***

i used to own a lot of real estate

**Reasons You Wish to be Appointed\***

serve the town of carrboro

**Have you ever served on any Town of Carrboro Committee or Board?\***

**If yes, which one(s)?**

No

**Are you currently serving on a Town Board or Committee?\***

Yes

No

**If yes, are you applying for a third consecutive term?\***

Yes

No

**If yes, please describe how you meet one, or more, of the following exceptions noted below. \***

n/a

After completing two full terms, a member must take off one year before applying for re-appointment to the same advisory board. However, a board member may apply to serve on another advisory board if he/she desires. The Board of Aldermen may make exceptions to this rule under the following circumstances: 1. To retain diversity on an advisory board; 2. A lack of applicants.

Print

**Advisory Board Chair Report (Complete One Per Applicant) - Submission #4602**

**Date Submitted: 2/27/2020**

**Applicant First Name:\***

Ellazar

**Applicant Last Name:**

Posada

**Advisory Board Name:\***

Planning Board

**Chair Name\***

Catherine Fray

**1. Has the applicant previously served on this or another advisory board?\***

Yes

No

**2. If yes, how many total years have they served?**

This should be available on the application or by asking the applicant.

**3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?**

Yes (Skip to Last Question)

No

**4. Is the applicant already serving on this advisory board and completed their two full terms?**

Yes

No

**5. Is the applicant applying for a special or expert seat on the advisory board?\***

Yes

No

**6. If yes, which seat?**

\_\_\_\_\_

**7. Did the applicant attend an advisory board meeting?\***

Yes  
 No

**8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?**

Yes  
 No

**9. Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on the advisory board:**

Yes  
 No

**10. If no, briefly explain:**

**11. In addition to your comments above, please check other qualities that the applicant offers that would help the Advisory Board meet its goals for community representation. Please note that candidates who do not meet any of these qualities are still eligible for appointment. Please communicate any urgent needs and priorities for Advisory Board composition to your Town Council liaison.**

Diversity  
 Occupation, Experience, or Special Skills  
 Other

**If other, please explain:**

# Advisory Board Application - Submission #4483

Date Submitted: 1/8/2020

First Name\*

Eliazar

Last Name\*

Posada

Date\*

1/8/2020

Select today's date

Address1\*

605 Jones Ferry Rd apt BB10

Address2

City\*

Carrboro

State

NC

Zip\*

27510

Is this address located within the corporate limits of the Town of Carrboro?\*

Yes

Please select Yes or No.

Is this address located within the Town's ETJ, Planning Jurisdiction, or Northern Transition Area?\*

No

Telephone\*

9194385609

Please enter your primary contact phone number.

Email Address\*

eposda@elcentronc.org

Enter your primary email address.

The demographic information provided below is of interest because your elected officials want the Town's advisory boards to reflect the diversity of the Town. Diversity of the applicant pool is a priority of the Board.

Date of Birth\*

10/14/1992

Please enter your Month/Day/Year of Birth

Race\*

Latino

Please enter your race.

Sex\*

Male

Please enter your sex.

Occupation\*

Senior Management Nonprofit

Please enter your occupation.

Are you a registered Orange County Voter?\*

Yes

Please answer Yes or No

Length of Residence in Orange County\*

1+ years

How long have you been a resident of Orange County?

Length of Residence in the Town of Carrboro\*

1+ years

How long have you been a resident of the Town of Carrboro?

I wish to be considered for appointment to the following committee/board(s) (Select no more than two (2)):

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Affordable Housing Advisory Commission | <input type="checkbox"/> Northern Transition Area Advisory Committee    |
| <input type="checkbox"/> Animal Control Board of Appeals                   | <input type="checkbox"/> OWASA Board of Directors                       |
| <input type="checkbox"/> Appearance Commission/NPDC                        | <input checked="" type="checkbox"/> Planning Board                      |
| <input type="checkbox"/> Arts Committee                                    | <input type="checkbox"/> Recreation and Parks Commission                |
| <input type="checkbox"/> Board of Adjustment                               | <input type="checkbox"/> Safe Routes to School Implementation Committee |
| <input type="checkbox"/> Economic Sustainability Commission                | <input type="checkbox"/> Stormwater Advisory Commission                 |
| <input type="checkbox"/> Environmental Advisory Board                      | <input type="checkbox"/> Tourism Development Authority*                 |
| <input type="checkbox"/> Human Services Commission                         | <input type="checkbox"/> Transportation Advisory Board                  |
| <input type="checkbox"/> Greenways Commission                              |   |

Please note that membership is limited to one advisory board at a time. You shall not be considered for appointment to another board unless you resign before filing an application or you are in the last six months of your current term.

**Other (advisory board not listed):**

\_\_\_\_\_

Please indicate by typing the advisory board that you are applying for.

**Advisory Board Preference\***

Planning

If you are applying for membership on more than one advisory board, please indicate your preference by typing your first choice. Please limit your selection to two boards).

**\*Employer/Self Employed**

El Centro Hispano, Inc.

Please enter your employment information. This is a requirement for application for the Tourism Development Authority.

**Number of Years Employed\***

5 years

Enter the number of years you have been employed at the organization listed to the left.

**\* Provide examples of how you are involved in the promotion of travel and tourism in the Town of Carrboro.**

As part of my work at El Centro Hispano, I organized Latinx Pride that took place in Carrboro commons this last year. We saw over 800 people come to the event, most from outside of Carrboro. We also had over 30 organizations/Business from here in Carrboro and from across the Triangle. I also help lead and organize the LatinoAmerican Festival that takes place every year on Weaver street in late August.

\*\*Required only for the Tourism Development Authority Application.\*\*

**Community related organizational memberships**

Boards Currently on: - The Chamber (BOD) - Triangle - Triad Complete Count Committee - Chair - Adelante (Advisory Council)  
Boards I served on previously - Made in Durham (Advisory Council) - NEXT (BOD) - Durham Council of PTAs - North Carolina  
AIDS Action Fund (BOD) - El Colectivo (Advisory Council) - Partnership for Healthy Durham (Advisory Council) - Durham's  
HIV/STI Advisory Council - Durham's Gang Reduction Strategy Steering Committee I organized: - Latinx Pride - Faith ID - Know  
Your Rights events - LatinAmerican Festival (help organize) - Noche de Ferias

Please enter the requested information.

**Relevant Experience:\***

I have worked in Carrboro for 5 years through El Centro Hispano and have gotten to know many of the needs of the Latinx and immigrant communities in Carrboro. I have served on City and Nonprofit Councils and Boards, so I understand the commitment and responsibility to serve.

**Reasons You Wish to be Appointed\***

I want to ensure the communities I work with everyday have a seat at the table. I moved to Carrboro over a year ago, but I have worked here for 5 years directly with people in the Latinx and Immigrant communities. In this time I have seen how people in my community, while they love Carrboro, they do not see themselves fully reflected in the decision making bodies. My appointment to the board will serve as a small example how Carrboro continues to move in the right direction.

**Have you ever served on any Town of Carrboro Committee or Board?\***

**If yes, which one(s)?**

\_\_\_\_\_

No

**Are you currently serving on a Town Board or Committee?\***

- Yes
- No

**If yes, are you applying for a third consecutive term?\***

- Yes
- No

**If yes, please describe how you meet one, or more, of the following exceptions noted below. \***

N/A

After completing two full terms, a member must take off one year before applying for re-appointment to the same advisory board. However, a board member may apply to serve on another advisory board if he/she desires. The Board of Aldermen may make exceptions to this rule under the following circumstances: 1. To retain diversity on an advisory board; 2. A lack of applicants.

Print

**Advisory Board Chair Report (Complete One Per Applicant) - Submission #4609**

**Date Submitted: 2/28/2020**

**Applicant First Name:\***

Susan

**Applicant Last Name:**

Poulton

**Advisory Board Name:\***

Planning Board

**Chair Name\***

Catherine Fray

**1. Has the applicant previously served on this or another advisory board?\***

Yes

No

**2. If yes, how many total years have they served?**

20+

This should be available on the application or by asking the applicant.

**3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?**

Yes (Skip to Last Question)

No

**4. Is the applicant already serving on this advisory board and completed their two full terms?**

Yes

No

**5. Is the applicant applying for a special or expert seat on the advisory board?\***

Yes

No

**6. If yes, which seat?**

NTA



**7. Did the applicant attend an advisory board meeting?\***

Yes  
 No

**8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?**

Yes  
 No

**9. Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on the advisory board:**

Yes  
 No

**10. If no, briefly explain:**

**11. In addition to your comments above, please check other qualities that the applicant offers that would help the Advisory Board meet its goals for community representation. Please note that candidates who do not meet any of these qualities are still eligible for appointment. Please communicate any urgent needs and priorities for Advisory Board composition to your Town Council liaison.**

Diversity  
 Occupation, Experience, or Special Skills  
 Other

**If other, please explain:**

Resident of Northern Transition Area

# Advisory Board Application - Submission #4518

Date Submitted: 1/25/2020

First Name\*

Susan

Last Name\*

Poulton

Date\*

1/25/2020

Select today's date

Address1\*

8720 Union Grove church road

Address2

City\*

Chapel Hill

State

NC

Zip\*

27516

Is this address located within the corporate limits of the Town of Carrboro?\*

No

Please select Yes or No.

Is this address located within the Town's ETJ, Planning Jurisdiction, or Northern Transition Area?\*

Northern Transition Area

Telephone\*

9196140529

Please enter your primary contact phone number.

Email Address\*

shmpoulton@gmail.com

Enter your primary email address.

The demographic information provided below is of interest because your elected officials want the Town's advisory boards to reflect the diversity of the Town. Diversity of the applicant pool is a priority of the Board.

Date of Birth\*

5/24/1949

Please enter your Month/Day/Year of Birth

Race\*

white

Please enter your race.

Sex\*

female

Please enter your sex.

Occupation\*

retired

Please enter your occupation.

Are you a registered Orange County Voter?\*

Yes

Please answer Yes or No

Length of Residence in Orange County\*

31 years

How long have you been a resident of Orange County?

Length of Residence in the Town of Carrboro\*

0

How long have you been a resident of the Town of Carrboro?

I wish to be considered for appointment to the following committee/board(s) (Select no more than two (2)):

- |                          |  |                                     |  |
|--------------------------|--|-------------------------------------|--|
| <input type="checkbox"/> | Affordable Housing Advisory Commission | <input type="checkbox"/>            | Northern Transition Area Advisory Committee    |
| <input type="checkbox"/> | Animal Control Board of Appeals        | <input type="checkbox"/>            | OWASA Board of Directors                       |
| <input type="checkbox"/> | Appearance Commission/NPDC             | <input checked="" type="checkbox"/> | Planning Board                                 |
| <input type="checkbox"/> | Arts Committee                         | <input type="checkbox"/>            | Recreation and Parks Commission                |
| <input type="checkbox"/> | Board of Adjustment                    | <input type="checkbox"/>            | Safe Routes to School Implementation Committee |
| <input type="checkbox"/> | Economic Sustainability Commission     | <input type="checkbox"/>            | Stormwater Advisory Commission                 |
| <input type="checkbox"/> | Environmental Advisory Board           | <input type="checkbox"/>            | Tourism Development Authority*                 |
| <input type="checkbox"/> | Human Services Commission              | <input type="checkbox"/>            | Transportation Advisory Board                  |
| <input type="checkbox"/> | Greenways Commission                   |                                     |  |

Please note that membership is limited to one advisory board at a time. You shall not be considered for appointment to another board unless you resign before filing an application or you are in the last six months of your current term.

**Other (advisory board not listed):**

\_\_\_\_\_

Please indicate by typing the advisory board that you are applying for.

**Advisory Board Preference\***

Planning Board

If you are applying for membership on more than one advisory board, please indicate your preference by typing your first choice. Please limit your selection to two boards).

**\*Employer/Self Employed**

retired. wroked for Duke MEDical Center

Please enter your employment information. This is a requirement for application for the Tourism Development Authority.

**Number of Years Employed\***

40+

Enter the number of years you have been employed at the organization listed to the left.

**\* Provide examples of how you are involved in the promotion of travel and tourism in the Town of Carrboro.**

\_\_\_\_\_

\*\*Required only for the Tourism Development Authority Application.\*\*

**Community Activities/Organizational Memberships\***

Democratic Party helper, network with NTA, Also report to the County Commissioners once a year.

Please enter the requested information.

**Relevant Experience:\***

Over 20 years on the Planning Board, I attend almost all functions for advisory boards and instigate others.

I now have a lot of experience of Carrboro planning. It would be a shame to waste it. I think I have experiences and the wishes of the NTA to share with the Board.

Have you ever served on any Town of Carrboro Committee or Board?\*

If yes, which one(s)?

Planning Board

Yes

Are you currently serving on a Town Board or Committee?\*



Yes



No

If yes, are you applying for a third consecutive term?\*



Yes



No

If yes, please describe how you meet one, or more, of the following exceptions noted below. \*

There has been no to apply for the NTA place on the Planning Board. I will be glad to stay as I have experience of this board.

After completing two full terms, a member must take off one year before applying for re-appointment to the same advisory board. However, a board member may apply to serve on another advisory board if he/she desires. The Board of Aldermen may make exceptions to this rule under the following circumstances: 1. To retain diversity on an advisory board; 2. A lack of applicants.

Print

**Advisory Board Chair Report (Complete One Per Applicant) - Submission #4599**

**Date Submitted: 2/27/2020**

**Applicant First Name:\***

Bruce

**Applicant Last Name:**

Sinclair

**Advisory Board Name:\***

Planning Board

**Chair Name\***

Catherine Fray

**1. Has the applicant previously served on this or another advisory board?\***

Yes

No

**2. If yes, how many total years have they served?**

9+ years

This should be available on the application or by asking the applicant.

**3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?**

Yes (Skip to Last Question)

No

**4. Is the applicant already serving on this advisory board and completed their two full terms?**

Yes

No

**5. Is the applicant applying for a special or expert seat on the advisory board?\***

Yes

No

**6. If yes, which seat?**

**7. Did the applicant attend an advisory board meeting?\***

- Yes
- No

**8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?**

- Yes
- No

**9. Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on the advisory board:**

- Yes
- No

**10. If no, briefly explain:**

**11. In addition to your comments above, please check other qualities that the applicant offers that would help the Advisory Board meet its goals for community representation. Please note that candidates who do not meet any of these qualities are still eligible for appointment. Please communicate any urgent needs and priorities for Advisory Board composition to your Town Council liaison.**

- Diversity
- Occupation, Experience, or Special Skills
- Other

**If other, please explain:**

# Advisory Board Application - Submission #4379

Date Submitted: 11/2/2019

**First Name\***

Bruce

**Last Name\***

Sinclair

**Date\***

11/2/2019

Select today's date

**Address1\***

1530 Pathway Dr

**Address2**

**City\***

Carrboro

**State**

NC

**Zip\***

27510-4100

**Is this address located within the corporate limits of the Town of Carrboro?\***

Yes

Please select Yes or No.

**Is this address located within the Town's ETJ, Planning Jurisdiction, or Northern Transition Area?\***

No

**Telephone\***

9195937971

Please enter your primary contact phone number.

**Email Address\***

bsinclair@nc.rr.com

Enter your primary email address.

**Date of Birth\***

7/1/1956

Please enter your Month/Day/Year of Birth

**Race\***

Caucasian

Please enter your race.

**Sex\***

M

Please enter your sex.

**Occupation\***

Retired

Please enter your occupation.

**Are you a registered Orange County Voter?\***

Yes

Please answer Yes or No

**Length of Residence in Orange County\***

25 years

How long have you been a resident of Orange County?

**Length of Residence in the Town of Carrboro\***

25 years

How long have you been a resident of the Town of Carrboro?

I wish to be considered for appointment to the following committee/board(s) (Select no more than two (2)):

- |                          |  |                                     |  |
|--------------------------|--|-------------------------------------|--|
| <input type="checkbox"/> | Affordable Housing Advisory Commission | <input type="checkbox"/>            | Northern Transition Area Advisory Committee    |
| <input type="checkbox"/> | Animal Control Board of Appeals        | <input type="checkbox"/>            | OWASA Board of Directors                       |
| <input type="checkbox"/> | Appearance Commission/NPDC             | <input checked="" type="checkbox"/> | Planning Board                                 |
| <input type="checkbox"/> | Arts Committee                         | <input type="checkbox"/>            | Recreation and Parks Commission                |
| <input type="checkbox"/> | Board of Adjustment                    | <input type="checkbox"/>            | Safe Routes to School Implementation Committee |
| <input type="checkbox"/> | Economic Sustainability Commission     | <input type="checkbox"/>            | Stormwater Advisory Commission                 |
| <input type="checkbox"/> | Environmental Advisory Board           | <input type="checkbox"/>            | Tourism Development Authority*                 |
| <input type="checkbox"/> | Human Services Commission              | <input type="checkbox"/>            | Transportation Advisory Board                  |
| <input type="checkbox"/> | Greenways Commission                   |                                     |  |

Please note that membership is limited to one advisory board at a time. You shall not be considered for appointment to another board unless you resign before filing an application or you are in the last six months of your current term.

**Other (advisory board not listed):**

\_\_\_\_\_

Please indicate by typing the advisory board that you are applying for.

**Advisory Board Preference\***

Planning Board

If you are applying for membership on more than one advisory board, please indicate your preference by typing your first choice. Please limit your selection to two boards).

**\*Employer/Self Employed**

Retired (Cisco Systems before that)

Please enter your employment information. This is a requirement for application for the Tourism Development Authority.

**Number of Years Employed\***

20

Enter the number of years you have been employed at the organization listed to the left.

**\* Provide examples of how you are involved in the promotion of travel and tourism in the Town of Carrboro.**

\_\_\_\_\_

\*\*Required only for the Tourism Development Authority Application.\*\*



Community received organizational membership  
Friends of Bolin Creek Board - treasurer Troop 845 BSA Committee - 20 years Carrboro EAB - 6 years (2 years as Chair)  
Chapel Hill ESAB - 3 years Carrboro Community Solar Board BSA Eagle Board review member (mentoring and evaluating candidates for Eagle Rank)

Please enter the requested information.

**Experience to Aid You in Working on Advisory Boards\***

- Carrboro EAB - Chapel Hill ESAB - various other corporate and charitable boards above.

**Reasons You Wish to be Appointed\***

I am currently serving on the Carrboro EAB. I believe that I will be term-limited next January. I would like to move on to another board, if possible. I have extensive experience ing serving on boards and believe I have a deep knowledge and breadth of experience in Town governance that can be of use to the Planning Board. Since I have been dealing with zoning and long-term planning issues in both Chapel Hill and Carrboro, I have a knowledge of current LUMOs, best practices and zoning and planning processes of both Towns and can contribute best ideas, practices from both jurisdictions. I would very much like to expand my knowledge of planning and zoning related to environmental issues to include other areas under the planning umbrella such as transportation, affordable housing and other areas of interest to the Board.

**Have you ever served on any Town of Carrboro Committee or Board?\***

**If yes, which one(s)?**

EAB

Yes

**Are you currently serving on a Town Board or Committee?\***



Yes



No

**If yes, are you applying for a third consecutive term?\***



Yes



No

**If yes, please describe how you meet one, or more, of the following exceptions noted below. \***

N/A

After completing two full terms, a member must take off one year before applying for re-appointment to the same advisory board. However, a board member may apply to serve on another advisory board if he/she desires. The Board of Aldermen may make exceptions to this rule under the following circumstances: 1. To retain diversity on an advisory board; 2. A lack of applicants.

Print

**Advisory Board Chair Report (Complete One Per Applicant) - Submission #4604**

Date Submitted: 2/27/2020

Applicant First Name:\*

Hissan

Applicant Last Name:

Waheed

Advisory Board Name:\*

Planning Board

Chair Name\*

Catherine Fray

1. Has the applicant previously served on this or another advisory board?\*

- Yes
- No

2. If yes, how many total years have they served?

This should be available on the application or by asking the applicant.

3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?

- Yes (Skip to Last Question)
- No

4. Is the applicant already serving on this advisory board and completed their two full terms?

- Yes
- No

5. Is the applicant applying for a special or expert seat on the advisory board?\*

- Yes
- No

6. If yes, which seat?

**7. Did the applicant attend an advisory board meeting?\***

Yes

No

**8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?**

Yes

No

**9. Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on the advisory board:**

Yes

No

**10. If no, briefly explain:**

**11. In addition to your comments above, please check other qualities that the applicant offers that would help the Advisory Board meet its goals for community representation. Please note that candidates who do not meet any of these qualities are still eligible for appointment. Please communicate any urgent needs and priorities for Advisory Board composition to your Town Council liaison.**

Diversity

Occupation, Experience, or Special Skills

Other

**If other, please explain:**

# Print

## Advisory Board Application - Submission #4497

Date Submitted: 1/14/2020

First Name\*

Hissan

Last Name\*

Waheed

Date\*

1/14/2020

Select today's date

Address1\*

505 Waterside Drive

Address2

City\*

Carrboro

State

NC

Zip\*

27510

Is this address located within the corporate limits of the Town of Carrboro?\*

Yes

Please select Yes or No.

Is this address located within the Town's ETJ, Planning Jurisdiction, or Northern Transition Area?\*

Planning Jurisdiction

Telephone\*

919-360-87

Please enter your primary contact phone number.

Email Address\*

hissanw@gmail.com

Enter your primary email address.

The demographic information provided below is of interest because your elected officials want the Town's advisory boards to reflect the diversity of the Town. Diversity of the applicant pool is a priority of the Board.

Date of Birth\*

4/27/1961

Please enter your Month/Day/Year of Birth

Race\*

South Asian

Please enter your race.

Sex\*

Male

Please enter your sex.

Occupation\*

Strategic Partnerships Manager

Please enter your occupation.

Are you a registered Orange County Voter?\*

Yes

Please answer Yes or No

Length of Residence in Orange County\*

10 years

How long have you been a resident of Orange County?

Length of Residence in the Town of Carrboro\*

10 years

How long have you been a resident of the Town of Carrboro?

I wish to be considered for appointment to the following committee/board(s) (Select no more than two (2)):

- |                                     |  |                                     |  |
|-------------------------------------|--|-------------------------------------|--|
| <input type="checkbox"/>            | Affordable Housing Advisory Commission | <input type="checkbox"/>            | Northern Transition Area Advisory Committee    |
| <input type="checkbox"/>            | Animal Control Board of Appeals        | <input type="checkbox"/>            | OWASA Board of Directors                       |
| <input type="checkbox"/>            | Appearance Commission/NPDC             | <input checked="" type="checkbox"/> | Planning Board                                 |
| <input type="checkbox"/>            | Arts Committee                         | <input type="checkbox"/>            | Recreation and Parks Commission                |
| <input type="checkbox"/>            | Board of Adjustment                    | <input type="checkbox"/>            | Safe Routes to School Implementation Committee |
| <input checked="" type="checkbox"/> | Economic Sustainability Commission     | <input type="checkbox"/>            | Stormwater Advisory Commission                 |
| <input type="checkbox"/>            | Environmental Advisory Board           | <input type="checkbox"/>            | Tourism Development Authority*                 |
| <input type="checkbox"/>            | Human Services Commission              | <input type="checkbox"/>            | Transportation Advisory Board                  |
| <input type="checkbox"/>            | Greenways Commission                   |                                     |  |

Please note that membership is limited to one advisory board at a time. You shall not be considered for appointment to another board unless you resign before filing an application or you are in the last six months of your current term.

**Other (advisory board not listed):**

Please indicate by typing the advisory board that you are applying for.

**Advisory Board Preference\***

If you are applying for membership on more than one advisory board, please indicate your preference by typing your first choice. Please limit your selection to two boards).

**\*Employer/Self Employed**

Please enter your employment information. This is a requirement for application for the Tourism Development Authority.

**Number of Years Employed\***

Enter the number of years you have been employed at the organization listed to the left.

**\* Provide examples of how you are involved in the promotion of travel and tourism in the Town of Carrboro.**

\*\*Required only for the Tourism Development Authority Application.\*\*

**Community Activities/Organizational Memberships\***

Please enter the requested information.

**Relevant Experience:\***

**Reasons You Wish to be Appointed\***

I wish to more fully participate in and give back to my community

**Have you ever served on any Town of Carrboro Committee or Board?\***

**If yes, which one(s)?**

No

**Are you currently serving on a Town Board or Committee?\***

Yes

No

**If yes, are you applying for a third consecutive term?\***

Yes

No

**If yes, please describe how you meet one, or more, of the following exceptions noted below. \***

NA

After completing two full terms, a member must take off one year before applying for re-appointment to the same advisory board. However, a board member may apply to serve on another advisory board if he/she desires. The Board of Aldermen may make exceptions to this rule under the following circumstances: 1. To retain diversity on an advisory board; 2. A lack of applicants.

Print

**Advisory Board Chair Report (Complete One Per Applicant) - Submission #4605**

Date Submitted: 2/27/2020

Applicant First Name:\*

Andrew

Applicant Last Name:

Whittemore

Advisory Board Name:\*

Planning Board

Chair Name\*

Catherine Fray

1. Has the applicant previously served on this or another advisory board?\*

Yes

No

2. If yes, how many total years have they served?

6

This should be available on the application or by asking the applicant.

3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?

Yes (Skip to Last Question)

No

4. Is the applicant already serving on this advisory board and completed their two full terms?

Yes

No

5. Is the applicant applying for a special or expert seat on the advisory board?\*

Yes

No

6. If yes, which seat?

**7. Did the applicant attend an advisory board meeting?\***

Yes  
 No

**8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?**

Yes  
 No

**9. Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on the advisory board:**

Yes  
 No

**10. If no, briefly explain:**

**11. In addition to your comments above, please check other qualities that the applicant offers that would help the Advisory Board meet its goals for community representation. Please note that candidates who do not meet any of these qualities are still eligible for appointment. Please communicate any urgent needs and priorities for Advisory Board composition to your Town Council liaison.**

Diversity  
 Occupation, Experience, or Special Skills  
 Other

**If other, please explain:**



# Print

## Advisory Board Application - Submission #4537

Date Submitted: 2/6/2020

First Name\*

Andrew

Last Name\*

Whittemore

Date\*

2/6/2020

Select today's date

Address1\*

105 TODD ST APT A

Address2

Apt, Suite, Bldg. (optional)

City\*

Carrboro

State

NC

Zip\*

27510

Is this address located within the corporate limits of the Town of Carrboro?\*

Yes

Please select Yes or No.

Is this address located within the Town's ETJ, Planning Jurisdiction, or Northern Transition Area?\*

No

Telephone\*

3104150937

Please enter your primary contact phone number.

Email Address\*

awhittemore@gmail.com

Enter your primary email address.

The demographic information provided below is of interest because your elected officials want the Town's advisory boards to reflect the diversity of the Town. Diversity of the applicant pool is a priority of the Board.

Date of Birth\*

8/14/1980

Please enter your Month/Day/Year of Birth

Race\*

White

Please enter your race.

Sex\*

Male

Please enter your sex.

Occupation\*

Assistant Faculty

Please enter your occupation.

Are you a registered Orange County Voter?\*

Yes

Please answer Yes or No

Length of Residence in Orange County\*

United States

How long have you been a resident of Orange County?

Length of Residence in the Town of Carrboro\*

6 years

How long have you been a resident of the Town of Carrboro?

I wish to be considered for appointment to the following committee/board(s) (Select no more than two (2)):

- |   |   |
|---|---|
| <input type="checkbox"/> Affordable Housing Advisory Commission | <input type="checkbox"/> Northern Transition Area Advisory Committee    |
| <input type="checkbox"/> Animal Control Board of Appeals        | <input type="checkbox"/> OWASA Board of Directors                       |
| <input type="checkbox"/> Appearance Commission/NPDC             | <input type="checkbox"/> Planning Board                                 |
| <input type="checkbox"/> Arts Committee                         | <input type="checkbox"/> Recreation and Parks Commission                |
| <input checked="" type="checkbox"/> Board of Adjustment         | <input type="checkbox"/> Safe Routes to School Implementation Committee |
| <input type="checkbox"/> Economic Sustainability Commission     | <input type="checkbox"/> Stormwater Advisory Commission                 |
| <input type="checkbox"/> Environmental Advisory Board           | <input type="checkbox"/> Tourism Development Authority*                 |
| <input type="checkbox"/> Human Services Commission              | <input type="checkbox"/> Transportation Advisory Board                  |
| <input type="checkbox"/> Greenways Commission                   |   |

Please note that membership is limited to one advisory board at a time. You shall not be considered for appointment to another board unless you resign before filing an application or you are in the last six months of your current term.

**Other (advisory board not listed):**

\_\_\_\_\_

Please indicate by typing the advisory board that you are applying for.

**Advisory Board Preference\***

Board of Adjustment

If you are applying for membership on more than one advisory board, please indicate your preference by typing your first choice. Please limit your selection to two boards).

**\*Employer/Self Employed**

UNC Chapel Hill

Please enter your employment information. This is a requirement for application for the Tourism Development Authority.

**Number of Years Employed\***

6

Enter the number of years you have been employed at the organization listed to the left.

**\* Provide examples of how you are involved in the promotion of travel and tourism in the Town of Carrboro.**

NA

\*\*Required only for the Tourism Development Authority Application.\*\*

**Community Activities/Organizational Memberships\***

Carrboro Planning Board 2014-present; Oak Lawn Committee (Dallas TX) 2012-2014; Nelson Tebedo Clinic (Dallas TX) 2011-2014

Please enter the requested information.

**Relevant Experience:\***

I have a masters degree and PhD in Urban Planning. I've taken courses on land use law and am familiar with the process of variance requests. My research focuses in part on zoning. I've served on the Carrboro Planning Board for 6 years. Prior to that I served on a design review board in Dallas, TX.

**Reasons You Wish to be Appointed\***

My research focuses in part on zoning. I've served on the Carrboro Planning Board for 6 years and would enjoy the opportunity to serve with and learn about another planning and zoning-related board.

**Have you ever served on any Town of Carrboro Committee or Board?\***

**If yes, which one(s)?**

Planning Board

Yes

**Are you currently serving on a Town Board or Committee?\***

Yes

No

**If yes, are you applying for a third consecutive term?\***

Yes

No

**If yes, please describe how you meet one, or more, of the following exceptions noted below. \***

I've been on the Planning Board for 6 years and have applied for a 3rd term on the Planning Board in case there aren't enough applicants. Damon Seils encouraged me to apply for the Board of Adjustment as well, and I'd have a preference for the BoA as I haven't done it before. Happy to serve on either though.

After completing two full terms, a member must take off one year before applying for re-appointment to the same advisory board. However, a board member may apply to serve on another advisory board if he/she desires. The Board of Aldermen may make exceptions to this rule under the following circumstances: 1. To retain diversity on an advisory board; 2. A lack of applicants.