

**Print**

## Advisory Board Chair Report (Complete One Per Applicant) - Submission #4564

Date Submitted: 2/16/2020

Advisory Board Name:\*

AHAC

Chair Name\*

Quinton Harper

Applicant First Name:\*

James

Applicant Last Name:

Colleran

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 Board of Aldermen Liaison.



Diversity



Occupation, Experience, or Special Skills



Other

If other, please explain:

Will invite applicant to AHAC 2/18; Also, Transportation Advisory Board is James's preference.

**Print**

## Advisory Board Application - Submission #4445

Date Submitted: 12/20/2019

**First Name\***

Jim

**Last Name\***

Colleran

**Date\***

12/20/2019

Select today's date

**Address1\***

202 Maple Ave

**Address2**

Apt A

**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?\***

ETJ

**Telephone\***

5405251960

Please enter your primary contact phone number.

**Email Address\***

jim@colleran.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\***

3/1/1944

Please enter your Month/Day/Year of Birth

**Race\***

White

Please enter your race.

**Sex\***

Male

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\***

2 years

How long have you been a resident of Orange County?

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

2 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)):

☐

Affordable Housing Advisory Commission

☐

Animal Control Board of Appeals

☐

Appearance Commission/NPDC

☐

Arts Committee

☐

Board of Adjustment

☐

Economic Sustainability Commission

☐

Environmental Advisory Board

☐

Human Services Commission

☐

Greenways Commission

☐

Northern Transition Area Advisory Committee

☐

OWASA Board of Directors

☐

Planning Board

☐

Recreation and Parks Commission

☐

Safe Routes to School Implementation Committee

☐

Stormwater Advisory Commission

☐

Tourism Development Authority\*

☒

Transportation Advisory Board

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 currently own an electric car and have studied electric vehicles for many years. I wish to both provide public charging alternatives for electric cars and to see about converting city vehicles including buses to use electricity as a power source.

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

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

Carrboro

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. \***

I have not been on a committee or 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 #4552

Date Submitted: 2/16/2020

Advisory Board Name:\*

AHAC

Chair Name\*

Quinton Harper

Applicant First Name:\*

Kelley

Applicant Last Name:

Gregory

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:**

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**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 Board of Aldermen Liaison.**



Diversity



Occupation, Experience, or Special Skills



Other

**If other, please explain:**

Met with Kelley. Attended AHAC meeting. A top choice. Board member for Community Home Trust and vocal advocate for homeownership on the CHT board.

## Print

### Advisory Board Application - Submission #4356

Date Submitted: 10/23/2019

First Name\*

Kelley

Last Name\*

Gregory

Date\*

10/23/2019

Select today's date

Address1\*

204 Lexes Trail

Address2

City\*

Chapel Hill

State

NC

Zip\*

27516

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\*

9195933430

Please enter your primary contact phone number.

Email Address\*

kgbutterflykg@gmail.com

Enter your primary email address.

Date of Birth\*

10/23/2019

Please enter your Month/Day/Year of Birth

Race\*

white

Please enter your race.

Sex\*

Female

Please enter your sex.

Occupation\*

event planner

Please enter your occupation.

Are you a registered Orange County Voter?\*

Yes

Please answer Yes or No

Length of Residence in Orange County\*

13

How long have you been a resident of Orange County?

Length of Residence in the Town of Carrboro\*

7

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\***

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.

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

I am on my second three-year term as a Board member of Community Home Trust. I am a homeowner representative on the CHT Board. I also serve as Advisory Board Member, Extraordinary Ventures.

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

I am a vocal advocate for homeowners on the Community Home Trust board. I am dedicated to the mission and vision of the organization. I have personal experience being an affordable home owner that I can add as a member of the Commission. In addition, I can add perspective and an informed body of knowledge around the social, financial and policy issues impacting affordable housing.

**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 #4566

Date Submitted: 2/16/2020

Advisory Board Name:\*

AHAC

Chair Name\*

Quinton Harper

Applicant First Name:\*

Quinton

Applicant Last Name:

Harper

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



Yes



No

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

3

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 Board of Aldermen Liaison.



Diversity



Occupation, Experience, or Special Skills



Other

If other, please explain:

Elected to serve as Chair should I be re-appointed for a second term. I look forward to continuing the work of AHAC.

## Print

# Advisory Board Chair Report (Complete One Per Applicant) - Submission #4553

Date Submitted: 2/16/2020

Advisory Board Name:\*

AHAC

Chair Name\*

Quinton Harper

Applicant First Name:\*

Suzy

Applicant Last Name:

Khachaturyan

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 Board of Aldermen Liaison.



Diversity



Occupation, Experience, or Special Skills



Other

If other, please explain:

Public Policy Analyst. Also applied for Environmental Advisory Board

**Print**

## Advisory Board Application - Submission #4481

Date Submitted: 1/6/2020

**First Name\***

Suzy

**Last Name\***

Khachaturyan

**Date\***

1/6/2020

Select today's date

**Address1\***

201 NC 54

**Address2**

Apt 728

**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\***

8018591844

Please enter your primary contact phone number.

**Email Address\***

suzy.khachaturyan@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\***

9/3/1989

Please enter your Month/Day/Year of Birth

**Race\***

White

Please enter your race.

**Sex\***

Female

Please enter your sex.

**Occupation\***

Public Policy Analyst

Please enter your occupation.

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

Yes

Please answer Yes or No

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

3.5 years

How long have you been a resident of Orange County?

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

3.5 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)):**\*



Affordable Housing Advisory Commission



Animal Control Board of Appeals



Appearance Commission/NPDC



Arts Committee



Board of Adjustment



Economic Sustainability Commission



Environmental Advisory Board



Human Services Commission



Greenways Commission



Northern Transition Area Advisory Committee



OWASA Board of Directors



Planning Board



Recreation and Parks Commission



Safe Routes to School Implementation Committee



Stormwater Advisory Commission



Tourism Development Authority\*



Transportation Advisory Board

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.

**\*Employer/Self Employed**

\_\_\_\_\_

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

**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).

**Number of Years Employed\***

1 year in February

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 am currently a Bridge Builder Volunteer with Refugee Community Partnership, an organization based in Carrboro. Locally, I was previously a volunteer at the SHAC clinic (2 years), Heavenly Groceries food pantry through the Jackson Center in Chapel Hill (approx. 1 year). I've served in other, less-relevant volunteer roles in the area, and I've served in countless other roles outside of the state.

Please enter the requested information.



**Relevant Experience:\***

I work at a nonprofit statewide public policy research and advocacy organization, which gives me a good sense of what is happening across various communities and states across the country, and also what the current and growing needs are. To varying degrees I have personally and professionally worked on issues related to public benefits, public housing and housing subsidies, immigrant and refugee rights, health care access and insurance, access to community resources, health equity, language justice, and more. While these areas have limited connection to the boards for which I have applied to serve, these issues are intersectional and, many times, individuals and families experience many overlapping challenges. I have a Bachelor of Science degree in Biology, with an emphasis in Environment and Ecology; a Master of Social Work degree; and a Master of Public Health degree.

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

Since adolescence, I've committed myself to volunteering in my community and using my time and relative expertise to improve the lives of those around me. Professionally, I work at the policy level, however the majority of my volunteering work, which I find incredibly fulfilling, has been helping individuals and families at the direct service level. I'm excited about this opportunity to put my more natural skills to use by learning, reviewing, and making recommendations regarding local policies that affect the community that I've come to love. I believe I would bring a critical eye and a unique perspective to the table if I'm selected to serve on a board.

**Have you ever served on any Town of Carboro 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 #4554

Date Submitted: 2/16/2020

Advisory Board Name:\*

AHAC

Chair Name\*

Quinton Harper

Applicant First Name:\*

Kirsten

Applicant Last Name:

Leloudis

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 Board of Aldermen Liaison.



Diversity



Occupation, Experience, or Special Skills



Other

If other, please explain:

Attended advisory board meeting. A top choice. Attorney. 15 years living in Carrboro. Volunteer with Legal AIDS NC. Brings a commitment to anti-poverty and anti-racist work, and experience in affordable housing law and policy. "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. "

**Print**

## Advisory Board Application - Submission #4335

Date Submitted: 10/12/2019

**First Name\***

Kirsten

**Last Name\***

Leloudis

**Date\***

10/12/2019

Select today's date

**Address1\***

142 BPW Club Rd

**Address2**

Apartment 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.

**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 (on and off)

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)):



Affordable Housing Advisory Commission



Animal Control Board of Appeals



Appearance Commission/NPDC



Arts Committee



Board of Adjustment



Economic Sustainability Commission



Environmental Advisory Board



Human Services Commission



Greenways Commission



Northern Transition Area Advisory Committee



OWASA Board of Directors



Planning Board



Recreation and Parks Commission



Safe Routes to School Implementation Committee



Stormwater Advisory Commission



Tourism Development Authority\*



Transportation Advisory Board

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**

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\***

2 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 am on the 5-woman steering committee of the North Carolina Chapter of the National Lawyers' Guild, a progressive voluntary professional association for attorneys and legal workers. I also volunteer with Legal Aid of North Carolina, where I used to work, to provide pro bono legal assistance to low-income individuals and families on topics related to subsidized housing law, eviction prevention, and tenants' rights to safe and habitable housing.

Please enter the requested information.

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

As a North Carolina licensed attorney, I have experience practicing in the areas of property law (deeds, land use), housing law (subsidized housing, eviction prevention, housing conditions), administrative law, and poverty law, which I believe makes me well-equipped to help assess town planning issues and advocate for development that serves all people in our community. I also have a Master's degree in public health and that academic training, partnered with my current role at the North Carolina Division of Public Health, allows me to bring a public health lens to my work and has also provided me with in-depth knowledge of environmental health issues that pertain to land use/development and town planning. Finally, I will bring my love of public service and my interpersonal skills and grit to my work as a member of the Planning Board.

### 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 briefly to Greenville, NC, for the first six months of my law career- but I have always been called back to this town, and Carrboro is where I intend to keep living, raise a family, and grow for the years to come. 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 Carrboro so special and to ensure that our growth and change reflects the values of our diverse community. I love this town and I want to be part of that work.

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 #4559

Date Submitted: 2/16/2020

Advisory Board Name:\*

AHAC

Chair Name\*

Quinton Harper

Applicant First Name:\*

Karen (Rae)

Applicant Last Name:

Ritter

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 Board of Aldermen Liaison.



Diversity



Occupation, Experience, or Special Skills



Other

If other, please explain:

White and intersex. "Strong interest" in Affordable Housing. Also applied (preference) for the Greenways Commission



**Print**

## Advisory Board Application - Submission #4439

Date Submitted: 12/18/2019

**First Name\***

Karen (Rae)

**Last Name\***

Ritter

**Date\***

12/18/2019

Select today's date

**Address1\***

201 Oak Ave

**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\***

9843649513

Please enter your primary contact phone number.

**Email Address\***

kritter@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\***

9/11/1969

Please enter your Month/Day/Year of Birth

**Race\***

White

Please enter your race.

**Sex\***

Intersex

Please enter your sex.

**Occupation\***

Programmer at UNC

Please enter your occupation.

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

Yes

Please answer Yes or No

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

4 years

How long have you been a resident of Orange County?

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

6 months

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 checked="" 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.

\*Employer/Self Employed

UNC

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

Advisory Board Preference\*

Greenways

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).

Number of Years Employed\*

4

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've only recently moved to Carrboro, however I live in town so I am able to participate in most town events since moving here. I participated in the Pride Parade, the Farmer's Market, have taken Storytelling classes at the Arts Center, Pottery, I've hiked most trails around the area, have participated in the music festival and the film festival this year. I'm a regular at Weaver Street Market, foodtrucks around town and local music hubs. I've been treated with kindness and respect every moment of being in this town and I plan to never leave. Seems fitting to get involved in a more formal way and since I'm an outdoor/animal/environment enthusiast, I thought the Greenways Commission might be my best option.

Please enter the requested information.

**Relevant Experience:\***

I have no real relevant experience, just a strong interest.

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

I love Carrboro. I was born intersex, raised female. I've lived in a lot of different towns in my 50 years and Carrboro is by far the best for folks like me. I am treated like a human being, nothing extra strange or extra special, just a regular human. I plan to live the rest of my life in Carrboro, NC. I love the outdoors and would spend all my time there with the natural critters if it was feasible. I think all creatures get something wonderful from being outside and would like to participate in the Greenways Commission to help ensure we continue to have wonderful safe clean green spaces.

**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 #4560

Date Submitted: 2/16/2020

Advisory Board Name:\*

AHAC

Chair Name\*

Quinton Harper

Applicant First Name:\*

Valerie

Applicant Last Name:

Sauer

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 Board of Aldermen Liaison.**



Diversity



Occupation, Experience, or Special Skills



Other

**If other, please explain:**

Also applied for the Human Services Commission and works for the Compass Center.

**Print**

## Advisory Board Application - Submission #4449

Date Submitted: 12/28/2019

**First Name\***

Valerie

**Last Name\***

Sauer

**Date\***

12/28/2019

Select today's date

**Address1\***

102A, Laurel Avenue

**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\***

9102601968

Please enter your primary contact phone number.

**Email Address\***

vsauer216@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\***

2/16/1994

Please enter your Month/Day/Year of Birth

**Race\***

White

Please enter your race.

**Sex\***

Female

Please enter your sex.

**Occupation\***

Director of Education Programs

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\***

1 year

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 checked="" 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\***

Human Services

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**

Compass Center

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

**Number of Years Employed\***

1.5

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.**

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

**Community Activities/Organizational Memberships\***

N/A

Please enter the requested information.

**Relevant Experience:\***

-Domestic Violence Advocate -Involvement in non-profit sector -Former employee of Department of Social Services -Former Intern of Chapel Hill Police Department -Chapel Hill High School Graduate -UNC Chapel Hill Alumnus

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

I am passionate about the well-being and future of my community. My personal and professional experiences afford me a unique perspective of the benefits and challenges of Orange County and Town is Carrboro residency. I believe in intentional and thoughtful growth that is inclusive and accessible for all Carrboro citizens. Our town, while welcoming and beneficial to some, can also be incredibly isolating and exclusionary. I seek to offer honest input that furthers the development of an open and affordable community that invites discourse and promotes sustainable livability.

**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 #4561

Date Submitted: 2/16/2020

Advisory Board Name:\*

AHAC

Chair Name\*

Quinton Harper

Applicant First Name:\*

James

Applicant Last Name:

Scott

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 Board of Aldermen Liaison.



Diversity



Occupation, Experience, or Special Skills



Other

If other, please explain:

Attended advisory board meeting. Met with James. Also, interested in OWASA.

**Print**

## Advisory Board Application - Submission #4457

Date Submitted: 12/30/2019

**First Name\***

James

**Last Name\***

Scott

**Date\***

12/30/2019

Select today's date

**Address1\***

222 Old Fayetteville Rd. A107

**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\***

336422518

Please enter your primary contact phone number.

**Email Address\***

scotjr4@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\***

7/20/1986

Please enter your Month/Day/Year of Birth

**Race\***

White

Please enter your race.

**Sex\***

Male

Please enter your sex.

**Occupation\***

Sponsorship Coordinator

Please enter your occupation.

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

Yes

Please answer Yes or No

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

7 years

How long have you been a resident of Orange County?

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

5 years, 7 months

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 checked="" 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\***

Appearance Commission/NPDC

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**

The Piedmont Sundial

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

**Number of Years Employed\***

2.5

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.**

\_\_\_\_\_

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

**Community Activities/Organizational Memberships\***

I volunteer regularly at a local assisted living facility. I have worked professionally and personally towards being involved with Carrboro's citizenry as well as the administrative processes that keep it running, and have consistently strived to be informed by and involved with the entire spectrum of people who inhabit the Town. I am also EFD, EPD and EMD certified which includes active CPR certification. Prior to that I spent time volunteering with the Chapel Hill Fire Department in order to gain experience and knowledge that aided me in working for Durham Communications. My ultimate goal, however, was to work in Orange County and for Carrboro specifically.

Please enter the requested information.

**Relevant Experience:\***

I studied Business at Wake Forest University. After University I studied corporate organizational structure and applied that experience towards a local but rather large home builder and land developer. I developed a personal interest in working for the public and working on projects that as much as possible benefitted the community. I have worked as a writer for a small upstart news publication where I gained experience covering municipal gatherings as well as interacting with local residents and staying informed of community events. I worked as a 911 Calltaker in Durham for the sole purpose of applying that knowledge and experience to Carrboro and Orange County. Currently I am primarily employed by UNC-TV where I raise sponsorship funds and handle administrative duties to support public television. I am still employed by The Piedmont Sundial, however my responsibility lies solely with being informed of community events and maintaining a comprehensive online events calendar.

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

I liked Chapel Hill when I moved there. Several years ago, I walked down Franklin Street and into Carrboro and immediately felt that this was home. It was a place where I certain I could thrive, and my impression at that time has turned out to be accurate. I wanted to work for a community, and since I arrived here I became certain that THIS was the community I wanted to serve. The goals and values of the Town as well as its residents are congruent with those that I hold personally. One of my mentors and a close personal friend - unbeknownst to me prior to my moving here - lived here for several years, and so I've experienced the positive characteristics of this Town even outside of it. I identify deeply with Carrboro and since my arrival have sought every opportunity to become more involved.

**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 #4562

Date Submitted: 2/16/2020

Advisory Board Name:\*

AHAC

Chair Name\*

Quinton Harper

Applicant First Name:\*

Anna

Applicant Last Name:

Spears

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 Board of Aldermen Liaison.**



Diversity



Occupation, Experience, or Special Skills



Other

**If other, please explain:**

Attended advisory board meeting. Scheduled meeting with candidate. Has lived in Carrboro for 8 years. Works for Chatham Habitat for Humanity. "I am passionate about affordable housing."

**Print**

## Advisory Board Application - Submission #4447

Date Submitted: 12/23/2019

**First Name\***

Anna

**Last Name\***

Spears

**Date\***

6/12/1989

Select today's date

**Address1\***

212 Prince Street

**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?\***

ETJ

**Telephone\***

9105203678

Please enter your primary contact phone number.

**Email Address\***

annaeliza@mac.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\***

6/12/1989

Please enter your Month/Day/Year of Birth

**Race\***

White

Please enter your race.

**Sex\***

Female

Please enter your sex.

**Occupation\***

Fundraising, Chatham  
Habitat for Humanity

Please enter your occupation.

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

Yes

Please answer Yes or No

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

8 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)):



Affordable Housing Advisory Commission



Animal Control Board of Appeals



Appearance Commission/NPDC



Arts Committee



Board of Adjustment



Economic Sustainability Commission



Environmental Advisory Board



Human Services Commission



Greenways Commission



Northern Transition Area Advisory Committee



OWASA Board of Directors



Planning Board



Recreation and Parks Commission



Safe Routes to School Implementation Committee



Stormwater Advisory Commission



Tourism Development Authority\*



Transportation Advisory Board

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.

**\*Employer/Self Employed**

Chatham Habitat for Humanity

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

**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).

**Number of Years Employed\***

8

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 work for Chatham Habitat for Humanity in Pittsboro, and am intimately involved in affordable housing advocacy in that community. I have not been involved in Carrboro, but would like to be. I am a member of the Pittsboro Rotary Club.

Please enter the requested information.

**Relevant Experience:\***

I have been working for Habitat for Humanity in Chatham County for eight years, and am well versed in affordable housing issues from a non-profit standpoint. I would love to be part of my own local community's affordable housing work, and believe that I could bring a useful perspective and an eagerness to learn.

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

I am passionate about affordable housing, and would love to be part of this work from a new perspective. I have spent years investing in Chatham County, and love my work there, but would love to have an impact on affordable housing in my own town. I want to raise my daughter in a Carrboro that is diverse and vibrant, but I don't think that's possible without taking action to support affordable housing.

**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 #4565

Date Submitted: 2/16/2020

Advisory Board Name:\*

AHAC

Chair Name\*

Quinton Harper

Applicant First Name:\*

Cain

Applicant Last Name:

Twyman

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



Yes



No

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

3

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 Board of Aldermen Liaison.



Diversity



Occupation, Experience, or Special Skills



Other

If other, please explain:

Top choice. Cain has also been nominated to serve as Vice Chair of the AHAC. Also, Cain has expressed an interest in serving on the Planning Board.

## Print

# Advisory Board Chair Report (Complete One Per Applicant) - Submission #4557

Date Submitted: 2/16/2020

Advisory Board Name:\*

AHAC

Chair Name\*

Quinton Harper

Applicant First Name:\*

Kendra

Applicant Last Name:

Van Pelt

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



Yes



No

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

n/a

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 Board of Aldermen Liaison.



Diversity



Occupation, Experience, or Special Skills



Other

If other, please explain:

Previously served on local Carrboro advisory board - Parks and Rec.

**Print**

## Advisory Board Application - Submission #4468

Date Submitted: 1/3/2020

**First Name\***

Kendra

**Last Name\***

Van Pelt-Merritt

**Date\***

1/17/2020

Select today's date

**Address1\***

200 NC Hwy 54, N-305

**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\***

919-360-63

Please enter your primary contact phone number.

**Email Address\***

sassyk105@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\***

4/16/1957

Please enter your Month/Day/Year of Birth

**Race\***

White

Please enter your race.

**Sex\***

Female

Please enter your sex.

**Occupation\***

Merchandise

Please enter your occupation.

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

Yes

Please answer Yes or No

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

30

How long have you been a resident of Orange County?

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

7

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 checked="" 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\***

Appearance

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**

In Store Group

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

**Number of Years Employed\***

19

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\***

Volunteering for town activities

Please enter the requested information.

**Relevant Experience:\***

Parks and Rec until cancer treatments



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

Many reasons.

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

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

Parks and Recreation

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. \***

Want to try something new.

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.