

Advisory Board Chair Report (Complete One Per Applicant) - Submission #4515

Date Submitted: 1/21/2020

Advisory Board Name:*

Appearance Commission

Chair Name*

Vickie Brown

Applicant First Name:*

David

Applicant Last Name:

Markiewicz

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



Yes



No

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

2

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:

Advisory Board Chair Report (Complete One Per Applicant) - Submission #4514

Date Submitted: 1/21/2020

Advisory Board Name:*

Appearance Commission

Chair Name*

Vickie Brown

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:

Advisory Board Application - Submission #4393

Date Submitted: 11/5/2019

First Name*

David

Last Name*

Markiewicz

Date*

3/4/1957

Select today's date

Address1*

403 South Greensboro Street

Address2

#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*

9198126875

Please enter your primary contact phone number.

Email Address*

dmarkiewicz57@gmail.com

Enter your primary email address.

Date of Birth*

3/28/1957

Please enter your Month/Day/Year of Birth

Race*

Caucasion

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*

1993

How long have you been a resident of Orange County?

Length of Residence in the Town of Carrboro*

2007

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 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*

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 worked for the American Heart Association for 40 years. In my last position I was responsible for 350 staff, a 90 million dollar annual budget, volunteer boards spread throughout the states of Georgia, Florida, Tennessee, Alabama, Louisiana, and Mississippi and the territory of Puerto Rico. I was one of 9 senior level staff at the national level working with volunteers to maximize our national annual budget of nearly one billion dollars to address the issues of Heart disease and Stroke. I am very comfortable, skilled and experienced with consensus-driven outcomes and community involvement to accomplish goals and objectives. to get things done. ,

Reasons You Wish to be Appointed*

Our community has an exceptional visual character and I believe that for it to be maintained and enhanced it needs vigilance and careful decision-making. I am interested in helping with this and have the time to devote to it. I own two homes in Carrboro and believe that if we all do our part to improve our town's appearance, all boats rise. I also am pragmatic and recognize that compromise often carries the day but in doing so more voices are heard and utilized and better decisions are made.

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

If yes, which one(s)?

Appearance

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. *

This does not apply to me.

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.

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.