Advisory Board Chair Report (Complete One Per Applicant) - Submission #5156

Date Submitted: 1/23/2021

Advisory Board Name:*	Chair Name*
Transportation Advisory Board	David Swan
Applicant First Name:*	Applicant Last Name:
Andrew	Cressman
1. Has the applicant previously served on this or another advisory board?*	2. If yes, how many total years have they served?
Yes	This should be available on the application or by asking the applicant.
I №	
3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?	4. Is the applicant already serving on this advisory board and completed their two full terms?
Yes (Skip to Last Question)	Yes
	☑
No	No
5. Is the applicant applying for a special or expert seat on the adv	sisory board?* 7 6. If yes, which seat?
Yes	
No No	
7. Did the applicant attend an advisory board meeting?*	8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?
Yes	Yes
No No	
140	No

9. Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on	10. If no, briefly explain:
the advisory board:	
Yes	
	Chamman op April
No	- Be down
its goals for community representation. Please note that can	pualities that the applicant offers that would help the Advisory Board meet addidates who do not meet any of these qualities are still eligible for orities for Advisory Board composition to your Town Council liaison.
Diversity	
Occupation, Experience, or Special Skills	
7	
Other	

Applicant participated in a joint meeting and was willing to share ideas with the group. Lives close to downtown and is a cyclist, in addition to working as an epidemiologist.

Date Submitted: 12/17/2020

Advisory Board Application - Submission #5082

First Name* Last Name* Date* Andrew Cressman 12/17/2020 Select today's date Address1* 1022 W Main Street Address2 City* State Zip* NC 27510 Carrboro Is this address located within the corporate limits of the Is this address located within the Town's ETJ, Planning Town of Carrboro?* Jurisdiction, or Northern Transition Area?* Yes W. Please select Yes or No. Telephone (111)-111-1111* Email Address* 7274220233 andycressman@me.com Please enter your primary Enter your primary email address. contact phone number. 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. Current Age* Race* Sex* White Male 5/30/1993 Please enter your race. Please enter your sex. Are you a registered Occupation* Length of Residence in Length of Residence in **Orange County Voter?*** Orange County* the Town of Carrboro* Epidemiologist 2.75 years 1.5 years Please enter your How long have you been a occupation. How long have you been a Please answer Yes or No resident of Orange County? resident of the Town of

Carrboro?

☐ I wish to be considered for appointment to the follow	ving committee/board(s) (Select no more than two (2)):
	▼
Affordable Housing Advisory Commission	Greenways Commission
	Crossivays Commission
Appearance Commission/NPDC	Northern Transition Area Advisory Committee
Arts Committee	OWASA Board of Directors
Board of Adjustment	Planning Board
Climate Action Team	Recreation and Parks Commission
Economic Sustainability Commission	Stormwater Advisory Commission
Environmental Advisory Board	Tourism Development Authority*
	7
Human Services Commission	Transportation Advisory Board
Other (advisory board not listed):	Advisory Board Preference*
Please indicate by typing the advisory board that you are	Transportation
applying for.	Please indicate your preference by typing your first choice. Please limit your selection above to two boards).
**Employer/Self Employed	Number of Years Employed
UNC	2.75 years
Please enter your employment information. This is a requirement for application for the Tourism Development Authority.	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 pro	motion of travel and tourism in the Town of Carrboro.
Required only for the Tourism Development Authority Applic	cation.
Community Activities/Organizational Memberships*	
North Carolina Soccer Referees Association & Triangle Socc	cer Referees
Please enter the requested information.	
Relevent Experience:*	
Pre-COVID-19 regular user of Chapel Hill Transit/GoTriangle	and bike commuter General interest/reader of transportation

Reasons You Wish to be Appointed*

I am an HIV epidemiologist between UNC and the NC Communicable Disease Branch, and before COVID-19, I was regularly commuting between both locations by bus (Chapel Hill Transit/GoTriangle) and bike. I have always been interested in public transportation and people's movement in general, and the bus system and greenways in Chapel Hill/Carrboro were one of the draws to settling here instead of other areas of the Triangle. I am especially interested in transportation during the COVID-19 pandemic, as regular and safe yet cost-effective transportation has never been important and alternative transportation by foot and bike, albeit primarily for leisure, has become much more common. I am also interested in how transportation will ultimately pivot as this pandemic hopefully ends. Although I have no local government experience, I hope to bring my background in quantitative research, interest in transportation, and personal transportation/commuting experience to improving our community.

We believe as a Town and as a Town Council that racial equity and diversity and inclusion are important. Please tell us your thoughts about this and why they are important not only in advisory board/commission work but also in all facets of local government and community work.*

I agree with the Town and Town Council that racial/ethnic equity and diversity and inclusion are important, especially with any local government and community work. While representation is not the sole component of diversity and inclusion, it is a key component, and when/where legally possible, we should consider actions such as quotas to make sure we are truly meeting our diversity and inclusion goals and representing as many as possible. I am personally willing to forgo an appointment to advance these goals if needed.

Have you ever served on any Town of Carrboro Committee or Board?*	If yes, which one(s)?		
No *			
Are you currently serving Committee?*	on a Town Board or	If yes, are you applying for a third consecutive term?*	
	сфілосичнинання		
Yes		Yes	Walle Parket to Color
V		₹	dillamenta
No		No	
Permittee			

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

Advisory Board Chair Report (Complete One Per Applicant) - Submission #5157

Date Submitted: 1/23/2021

Advisory Board Name:*	Chair Name*
Transportation Advisory Board	David Swan
Applicant First Name:*	Applicant Last Name:
Cummie	Davis
1. Has the applicant previously served on this or another advisory board?*	2. If yes, how many total years have they served?
Yes No	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)	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 advi Yes No	sory board?* 6. If yes, which seat? Diversity
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	10. If no, briefly explain:
time commitment, roles, and responsibilities of serving on the advisory board:	
ent auvisor y nome u.	
	ALL
Yes	
No	
The Act of	
its goals for community representation. Please note that candi	dities that the applicant offers that would help the Advisory Board meet dates who do not meet any of these qualities are still eligible for ities for Advisory Board composition to your Town Council liaison.
Diversity	
Occupation, Experience, or Special Skills	
Other	

Applicant was not able to attend a meeting due to technical issues, but expressed a continued interest and desire to participate. Applicant meets the diversity criteria the council put a priority on and works in transportation in some fashion.

Advisory Board Application - Submission #5028

Date Submitted: 10/28/2020

First Name*	Last Name*	Date*	
Cummie	Davis	10/28	3/2020
		Select t	today's date
Address1*			
809 Old Fayetteville Rd			
Address2			
City*	· · · · · · · · · · · · · · · · · · ·	State	Zip*
Chapel Hill		NC	27516
Town of Carrboro?* Yes Please select Yes or No. Telephone*	Email Address*	Jurisdiction, or Northern Tra	ansition Area?*
9195259181	cummierdavis@yahoo.com		
Please enter your primary contact phone number.	Enter your primary email addr	ress.	
The demographic informati boards to reflect the diversi	on provided below is of interesty of the	st because your elected official applicant pool is a priority of t	s want the Town's advisory he Board.
Date of Birth*	Race*	Sex*	
10/28/2020	Black	Female	
	Please enter your race.	Please enter your sex.	
Please enter your Month/Day/Year of Birth			
Occupation*	Are you a registered Orange County Voter?*	Length of Residence in Orange County*	Length of Residence in the Town of Carrboro*
Rehab Technician Please enter your	Yes *	14	2
occupation.	Please answer Yes or No	How long have you been a resident of Orange County?	How long have you been a resident of the Town of Carrboro?

I wish to be considered for appointment to the followi	ing committee/board(s) (Select no more than two (2)):
Affordable Housing Advisory Commission	Northern Transition Area Advisory Committee
Appearance Commission/NPDC	OWASA Board of Directors
Arts Committee	Planning Board
Board of Adjustment	Recreation and Parks Commission
Economic Sustainability Commission	Stormwater Advisory Commission
Environmental Advisory Board	Tourism Development Authority*
Human Services Commission	Transportation Advisory Board
Greenways Commission	
Please note that membership is limited to one advisory boa another board unless you resign before filing an application	ard at a time. You shall not be considered for appointment to or you are in the last six months of your current term.
Office (additional transfer of the day)	Advisory Deavel Desferonce*
Other (advisory board not listed):	Advisory Board Preference*
	Transportation
Other (advisory board not listed): Please indicate by typing the advisory board that you are applying for.	
Please indicate by typing the advisory board that you are	Transportation Please indicate your preference by typing your first choice.
Please indicate by typing the advisory board that you are applying for.	Transportation Please indicate your preference by typing your first choice. Please limit your selection above to two boards).
Please indicate by typing the advisory board that you are applying for. **Employer/Self Employed	Transportation Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed
Please indicate by typing the advisory board that you are applying for. **Employer/Self Employed New Destinations Serenity Crest Please enter your employment information. This is a requirement for application for the Tourism Development	Transportation Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed 2 Enter the number of years you have been employed at the organization listed to the left.
Please indicate by typing the advisory board that you are applying for. **Employer/Self Employed New Destinations Serenity Crest Please enter your employment information. This is a requirement for application for the Tourism Development Authority.	Transportation Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed 2 Enter the number of years you have been employed at the organization listed to the left. motion of travel and tourism in the Town of Carrboro.
Please indicate by typing the advisory board that you are applying for. **Employer/Self Employed New Destinations Serenity Crest Please enter your employment information. This is a requirement for application for the Tourism Development Authority. ** Provide examples of how you are involved in the prores.	Transportation Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed 2 Enter the number of years you have been employed at the organization listed to the left. motion of travel and tourism in the Town of Carrboro. I, Carrboro area.
Please indicate by typing the advisory board that you are applying for. **Employer/Self Employed New Destinations Serenity Crest Please enter your employment information. This is a requirement for application for the Tourism Development Authority. ** Provide examples of how you are involved in the profit think I am very informative when it comes to the Chapel Hill	Transportation Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed 2 Enter the number of years you have been employed at the organization listed to the left. motion of travel and tourism in the Town of Carrboro. I, Carrboro area.
Please indicate by typing the advisory board that you are applying for. **Employer/Self Employed New Destinations Serenity Crest Please enter your employment information. This is a requirement for application for the Tourism Development Authority. ** Provide examples of how you are involved in the pror I think I am very informative when it comes to the Chapel Hill **Required only for the Tourism Development Authority Applic	Transportation Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed 2 Enter the number of years you have been employed at the organization listed to the left. motion of travel and tourism in the Town of Carrboro. I, Carrboro area. cation.**
Please indicate by typing the advisory board that you are applying for. **Employer/Self Employed New Destinations Serenity Crest Please enter your employment information. This is a requirement for application for the Tourism Development Authority. ** Provide examples of how you are involved in the pror I think I am very informative when it comes to the Chapel Hill **Required only for the Tourism Development Authority Applic Community Activities/Organizational Memberships*	Transportation Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed 2 Enter the number of years you have been employed at the organization listed to the left. motion of travel and tourism in the Town of Carrboro. I, Carrboro area. cation.**
Please indicate by typing the advisory board that you are applying for. **Employer/Self Employed New Destinations Serenity Crest Please enter your employment information. This is a requirement for application for the Tourism Development Authority. ** Provide examples of how you are involved in the provide in the provide in the provide examples of the Tourism Development Authority Application only for the Tourism Development Authority Application on the Tourism Development Auth	Transportation Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed 2 Enter the number of years you have been employed at the organization listed to the left. motion of travel and tourism in the Town of Carrboro. I, Carrboro area. cation.**
Please indicate by typing the advisory board that you are applying for. **Employer/Self Employed New Destinations Serenity Crest Please enter your employment information. This is a requirement for application for the Tourism Development Authority. **Provide examples of how you are involved in the pror I think I am very informative when it comes to the Chapel Hill **Required only for the Tourism Development Authority Applic Community Activities/Organizational Memberships* I enjoy transporting and I would like to say I am very friendly. Please enter the requested information.	Transportation Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed 2 Enter the number of years you have been employed at the organization listed to the left. motion of travel and tourism in the Town of Carrboro. I, Carrboro area. eation.**

	, o a		
I have my own transportation my help. I enjoy serving and h		ies and feel like I can offer my expertise to any that ma	y need
lave you ever served on any Town of Carrboro Committee or Board?*	If yes, which one(s)?		
No <u>▼</u>			
_Are you currently serving	on a Town Board or	if yes, are you applying for a third consecutive	ve
Committee?*		term?*	
Yes		Yes	
7		2	

No

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

No

Advisory Board Chair Report (Complete One Per Applicant) - Submission #5201

Date Submitted: 2/11/2021

Advisory Board Name:*	Chair Name*
Transportation Advisory Board	David Swan
Applicant First Name:*	Applicant Last Name:
Charlie	Hileman
1. Has the applicant previously served on this or another advisory board?*	If yes, how many total years have they served? At least 6 - Charlie served on the TAB at least once and as
	chair of the Greenways Commission
Yes	This should be available on the application or by asking the
	applicant.
No	
3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?	4. Is the applicant already serving on this advisory board and completed their two full terms?
Yes (Skip to Last Question)	Yes
No	No
5. Is the applicant applying for a special or expert seat on the advi	sory board?* — 6. If yes, which seat?
Yes	
No	
7. Did the applicant attend an advisory board meeting?*	0 TC
Did the apparents acceled an advisory total differenting:	8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?
♥	
Yes	
	Yes
No	
	No

 Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on 	10. If no, briefly explain:
the advisory board:	
Yes	
No	
its goals for community representation. Please note that cand	alities that the applicant offers that would help the Advisory Board meet idates who do not meet any of these qualities are still eligible for ities for Advisory Board composition to your Town Council liaison.
Diversity	
Occupation, Experience, or Special Skills	
Other	

Charlie has a wealth of experience from serving on the TAB some time back as well as more recently as the chair of the Greenways Commission. Charlie is also a passionate advocate for transportation issues and one of the founding members of the Carrboro Bike Coalition, in addition to being an avid cyclist and public transportation rider. He would like to support equitable access to all forms of transportation. I should note that Charlie did say " If there are other new people that are applying, I think they should be prioritized over people like myself, so Carrboro can continue to get others involved." Charlie would surely be a valuable member of the TAB, but I wanted to pass along his wishes for your consideration as well.

Advisory Board Application - Submission #5140

Date Submitted: 1/18/2021 First Name* Last Name* Date* Charlie Hileman 1/18/2021 Select today's date Address1* 507 Hillsborough Rd Address2 City* State Zip* Camboro North Carolina 27510 Is this address located within the corporate limits of the is this address located within the Town's ETJ, Planning Town of Carrboro?* Jurisdiction, or Northern Transition Area?* Yes * No Please select Yes or No. Telephone (111)-111-1111* Email Address* 9193571869 carrbonate@gmail.com Please enter your primary Enter your primary email address. contact phone number. 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. Current Age* Race* Sex* white male 9/8/1964 Please enter your race. Please enter your sex. Occupation* Are you a registered Length of Residence in Length of Residence in Orange County Voter?* Orange County* the Town of Carrboro* software engineer T North Carolina 20 Please enter your occupation. Please answer Yes or No How long have you been a How long have you been a

resident of Orange County?

resident of the Town of

Camboro?

I wish to be considered for appointment to the following	ing committee/board(s) (Select no more than two (2)):
Affordable Housing Advisory Commission	Greenways Commission
Appearance Commission/NPDC	Northern Transition Area Advisory Committee
Arts Committee	OWASA Board of Directors
Board of Adjustment	Planning Board
Climate Action Team	Recreation and Parks Commission
Economic Sustainability Commission	Stormwater Advisory Commission
Environmental Advisory Board	Tourism Development Authority*
	7
Human Services Commission	Transportation Advisory Board
Please note that membership is limited to one advisory boa another board unless you resign before filing an application	rd at a time. You shall not be considered for appointment to or you are in the last six months of your current term.
Other (advisory board not listed):	Advisory Board Preference*
Please indicate by typing the advisory board that you are	Advisory Board Preference*
Please indicate by typing the advisory board that you are applying for.	Advisory Board Preference* Transportation Advisory Board Please indicate your preference by typing your first choice.
Please indicate by typing the advisory board that you are applying for.	Advisory Board Preference* Transportation Advisory Board Please indicate your preference by typing your first choice. Please limit your selection above to two boards).
Please indicate by typing the advisory board that you are applying for. **Employer/Self Employed WebMD	Advisory Board Preference* Transportation Advisory Board Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed
Please indicate by typing the advisory board that you are applying for. **Employer/Self Employed WebMD Please enter your employment information. This is a requirement for application for the Tourism Development Authority.	Advisory Board Preference* Transportation Advisory Board Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed 6 Enter the number of years you have been employed at the organization listed to the left.
Please indicate by typing the advisory board that you are applying for. **Employer/Self Employed WebMD Please enter your employment information. This is a requirement for application for the Tourism Development Authority. ** Provide examples of how you are involved in the prom	Advisory Board Preference* Transportation Advisory Board Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed 6 Enter the number of years you have been employed at the organization listed to the left.
WebMD Please enter your employment information. This is a requirement for application for the Tourism Development	Advisory Board Preference* Transportation Advisory Board Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed 6 Enter the number of years you have been employed at the organization listed to the left.
Please indicate by typing the advisory board that you are applying for. **Employer/Self Employed WebMD Please enter your employment information. This is a requirement for application for the Tourism Development Authority. **Provide examples of how you are involved in the prom **Required only for the Tourism Development Authority Applica Community Activities/Organizational Memberships*	Advisory Board Preference* Transportation Advisory Board Please indicate your preference by typing your first choice. Please limit your selection above to two boards). Number of Years Employed 6 Enter the number of years you have been employed at the organization listed to the left.

Relevent Experience:*

In addition to my membership in the boards listed, I have been interested in transportation issues for a number of years. I regularly ride CHT and GoTriangle (up until Covid).

Reasons You Wish to be Appointed*

I would like to work to expand alternative transportation access to parts of Carrboro that have not been well connected, for example the apartment complexes that are currently largely cut off by the Rt-54 bypass. There are a number of new approaches that Carrboro might incorporate to improve pedestrian experiences downtown. And I think we need a broader approach to transportation planning with our surrounding partners, rather than focusing solely on Carrboro.

We believe as a Town and as a Town Council that racial equity and diversity and inclusion are important. Please tell us your thoughts about this and why they are important not only in advisory board/commission work but also in all facets of local government and community work.*

I see this often while riding the buses - there are people that feel they can affect change, while others just assume they must adapt to the existing system. Overall, our leadership needs to better reflect the population, racially but also socio-economically, while also representing the traditional communities. It's not an easy transition, and many of these problems are part of our history as a southern town, but I know people are trying.

	If yes, which one(s)?		
	Greenways Commission, Tran	asportation Advisory Board	
Yes ▼			
_Are you currently serving Committee?*	on a Town Board or	If yes, are you applying for a third consecutive term?*	
	- The same application of the		
Yes		Yes	
₹			- Karana
No		No	EDINAMAKE (III
	1444/4-des		
	Are you currently serving Committee?* Yes	Are you currently serving on a Town Board or Committee?* Yes Yes Yes Yes	Greenways Commission, Transportation Advisory Board Yes Are you currently serving on a Town Board or Committee?* Yes Yes Yes Yes Yes Yes

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

Advisory Board Chair Report (Complete One Per Applicant) - Submission #5155

Date Submitted: 1/23/2021

Advisory Board Name:*	Chair Name*	
Transportation Advisory Board	David Swan	
Applicant First Name:*	Applicant Last Name:	
Lenore	Jones-Peretto	
1. Has the applicant previously served on this or another advisory board?*	2. If yes, how many total years have they served?	
Yes V	This should be available on the application or by asking the applicant.	
No		
3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?	4. Is the applicant already serving on this advisory board and completed their two full terms?	
Yes (Skip to Lost Quanties)		
Yes (Skip to Last Question)	Yes	
No	No	
5. Is the applicant applying for a special or expert seat on the advis	sory board?* — 6. If yes, which seat?	
Yes		
No		
7. Did the applicant attend an advisory board meeting?*	8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?	
	you contact them wa phone of enam:	
Yes		
	Yes	
No No		
	No	
The second secon		

9. Applicant has demonstrated a clear understanding of the	10. If no, briefly explain:
time commitment, roles, and responsibilities of serving on the advisory board:	
Yes	
No	
11. In addition to your comments above, please check other q	qualities that the applicant offers that would help the Advisory Board meet
appointment. Please communicate any urgent needs and price	didates who do not meet any of these qualities are still eligible for prities for Advisory Board composition to your Town Council liaison.
Diversity	
Occupation, Experience, or Special Skills	La de la companya de
	*A.A.A.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C
Other	

Applicant participated in a joint meeting and demonstrated a willingness to share ideas, plus she mentioned that she has a child with special needs, so she will bring that perspective to the board.

Advisory Board Application - Submission #5094

Date Submitted: 12/19/2020

First Name*	Last Name*	Date*	
Lenore	Jones-Peretto	12/19	9/2020
		Select	today's date
Address1*		-	
103 S. Fields Circle			
Address2			
	-		
City*		State	Zip*
Chapel Hill		NC	27516
Yes Please select Yes or No. Telephone (111)-111-1111*	Email Address*	Unsure <u>~</u>	
9194143059	peretto@bellsouth.net		
Please enter your primary contact phone number.	Enter your primary email address.		
The demographic informati boards to reflect the diversi	on provided below is of interesty of the Town. Diversity of the	st because your elected officials applicant pool is a priority of th	s want the Town's advisory ne Board.
Current Age*	Race*	Sex*	
7/5/1969	Black	F	
	Please enter your race.	Please enter your sex.	
Occupation*	Are you a registered Orange County Voter?*	Length of Residence in Orange County*	Length of Residence in the Town of Carrboro*
Please enter your	Yes <u>▼</u>	22 years	22 years
occupation.	Please answer Yes or No	How long have you been a resident of Orange County?	How long have you been a resident of the Town of Carrboro?

	[^{17]}
Affordable Housing Advisory Commission	Greenways Commission
Appearance Commission/NPDC	Northern Transition Area Advisory Committee
Arts Committee	OWASA Board of Directors
Board of Adjustment	Planning Board
	<u> </u>
Climate Action Team	Recreation and Parks Commission
Economic Sustainability Commission	Stormwater Advisory Commission
Environmental Advisory Board	Tourism Development Authority*
[7]	V
	AND THE RESERVE OF THE PERSON
Human Services Commission	Transportation Advisory Board pard at a time. You shall not be considered for appointment to
Human Services Commission Please note that membership is limited to one advisory bo	Transportation Advisory Board pard at a time. You shall not be considered for appointment to
Human Services Commission Please note that membership is limited to one advisory be another board unless you resign before filing an application Other (advisory board not listed):	Transportation Advisory Board pard at a time. You shall not be considered for appointment to an or you are in the last six months of your current term.
Human Services Commission Please note that membership is limited to one advisory be another board unless you resign before filing an application	Transportation Advisory Board pard at a time. You shall not be considered for appointment to on or you are in the last six months of your current term. Advisory Board Preference*
Human Services Commission Please note that membership is limited to one advisory be another board unless you resign before filing an application Other (advisory board not listed): Please indicate by typing the advisory board that you are	Transportation Advisory Board pard at a time. You shall not be considered for appointment to an or you are in the last six months of your current term. Advisory Board Preference* Transportation Please indicate your preference by typing your first choice
Human Services Commission Please note that membership is limited to one advisory be another board unless you resign before filing an application Other (advisory board not listed): Please indicate by typing the advisory board that you are applying for.	Transportation Advisory Board pard at a time. You shall not be considered for appointment to an or you are in the last six months of your current term. Advisory Board Preference* Transportation Please indicate your preference by typing your first choice Please limit your selection above to two boards).
Human Services Commission Please note that membership is limited to one advisory be another board unless you resign before filing an application Other (advisory board not listed): Please indicate by typing the advisory board that you are applying for. *Employer/Self Employed	Transportation Advisory Board pard at a time. You shall not be considered for appointment to an or you are in the last six months of your current term. Advisory Board Preference* Transportation Please indicate your preference by typing your first choice Please limit your selection above to two boards). Number of Years Employed
Please note that membership is limited to one advisory be another board unless you resign before filing an application Other (advisory board not listed): Please indicate by typing the advisory board that you are applying for. *Employer/Self Employed Self Employed Please enter your employment information. This is a requirement for application for the Tourism Development Authority.	Transportation Advisory Board pard at a time. You shall not be considered for appointment to on or you are in the last six months of your current term. Advisory Board Preference* Transportation Please indicate your preference by typing your first choice Please limit your selection above to two boards). Number of Years Employed 12 Enter the number of years you have been employed at the
Please note that membership is limited to one advisory be another board unless you resign before filing an application Other (advisory board not listed): Please indicate by typing the advisory board that you are applying for. *Employer/Self Employed Self Employed Please enter your employment information. This is a requirement for application for the Tourism Development Authority.	Transportation Advisory Board pard at a time. You shall not be considered for appointment to on or you are in the last six months of your current term. Advisory Board Preference* Transportation Please indicate your preference by typing your first choice Please limit your selection above to two boards). Number of Years Employed 12 Enter the number of years you have been employed at the organization listed to the left.
Please note that membership is limited to one advisory be another board unless you resign before filing an application. Other (advisory board not listed): Please indicate by typing the advisory board that you are applying for. *Employer/Self Employed Self Employed Please enter your employment information. This is a requirement for application for the Tourism Development Authority. * Provide examples of how you are involved in the pro- **Required only for the Tourism Development Authority Application.	Transportation Advisory Board pard at a time. You shall not be considered for appointment to on or you are in the last six months of your current term. Advisory Board Preference* Transportation Please indicate your preference by typing your first choice Please limit your selection above to two boards). Number of Years Employed 12 Enter the number of years you have been employed at the organization listed to the left.
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I don't have relevant experience unless you consider my years of using the bus as a kid in New Haven, CT and the train as a law student in NY. I am an attorney who has worked on complex contracts in a complex business environment for many years. I'm adept at negotiating compromise in furtherance of group goals. I have taught political science at Duke and a course at Duke

Law. I have an analytical mind.

Reasons You Wish to be Appointed*

I am interested in finding ways to have more convenient public transportation for all of the residents of Carrboro so that we use our cars less and can visit downtown more easily without creating parking issues.

We believe as a Town and as a Town Council that racial equity and diversity and inclusion are important. Please tell us your thoughts about this and why they are important not only in advisory board/commission work but also in all facets of local government and community work.*

I, as an African American woman of Caribbean descent, believe that racial equity and diversity are particularly important here in Carrboro because many of our neighborhoods are still essentially segregated. While this may not be intentional, it is definitely the result in many neighborhoods like mine. I think that diversity and inclusion are very important in advisory board and commissions work because out town is supposed to be working to benefit all members and those entities cannot adequately take into account all members of our town without participation from all races. Nor is it possible to address issues of all portions of our town without equity being considered. That said, I think that equity is not merely about race, but also about economic status. A town is not properly governed if the interests of all residents are not taken into consideration in the planning of its facilities, services, and growth.

Have you ever served on any Town of Carrboro Committee or Board?*	If yes, which one(s)?		
Are you currently serving Committee?*	on a Town Board or	If yes, are you applying for a third consecutive term?*	
	A DI		
Yes		Yes	
		₩	-
No		No	-
			-

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

Advisory Board Chair Report (Complete One Per Applicant) - Submission #5200

Date Submitted: 2/11/2021

Advisory Board Name:*	Chair Name*
Transportation Advisory Board	David Swan
Applicant First Name:* David	Applicant Last Name:
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)	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 advis 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	10. If no, briefly explain:
time commitment, roles, and responsibilities of serving on the advisory board:	
the action y pour a.	-
	ADMINISTRAÇÃO
Yes	
No	
11. In addition to your comments above, please check other q	ualities that the applicant offers that would help the Advisory Board meet
its goals for community representation. Please note that can	didates who do not meet any of these qualities are still eligible for rities for Advisory Board composition to your Town Council liaison.
apparement i rease communicate any digent needs and prio	Thes for Advisory Board composition to your fown Council Halson.
Diversity	
Occupation, Experience, or Special Skills	
Other	
AMAZIA AMAZIA	

Since this is my own application, I would say that it has been a pleasure serving my first term and working as chair for a year. I am excited by the work ahead of the TAB and Carrboro, especially the implementation of the new bicycle plan and the town's comprehensive planning process. The town has a chance to make great strides forward in equitable transportation solutions for all, which I will be advocating for either in a role with the TAB or as a motivated and involved resident. With a 6 year old daughter who loves to ride bikes around town, I've got a special interest in seeing Carrboro become even more safe and accessible to everyone.