Interest Form for Northwest Portland Transportation Management Association (TMA)

The purpose of this form is to obtain information for use in making appointments to the Northwest Portland Transportation Management Association, and to assist the Mayor in making inquiries concerning the qualifications of applicants for appointment. Please note that information provided in this document is public information, with the exception of the confidential section. (Information in the confidential section will only be disclosed as required by law.) If you have a recently prepared biography or resumé, please attach it to this form. Thank you for your interest.

Please return application, resumé and any additional information to:

Portland Bureau of Transportation
ATTN: Bill Hoffman
1120 SW 5th Ave., Suite 800
Portland, Oregon 97204

bill.hoffman@portlandoregon.gov

To help ensure equal access to City programs, services and activities, the City of Portland will reasonably modify policies/procedures and provide auxiliary aids/services to persons with disabilities. Call 503-823-2030 or 503-823-4000 with such requests.

Name:_____
First Middle Initial Last

Mailing Address:_____

_____

Occupation:_____

Daytime Phone: _____

Email: _____

Biography/Resumé Attached? [ ] Yes [ ] No

Supplemental Questions:

A. Reasons for wanting to serve on this group:

B. List skills or knowledge that would be relevant to this Board/Commission:

C. List work or volunteer experience that would add to your expertise for this Board/Commission:

Dates (from/to): Employer or Volunteer Activity: Responsibilities:

D. List your experience working on diverse teams or committees:

E. Describe your understanding of the services provided by the Northwest Parking Transportation Management Association:

My signature affirms that all information contained herein is true to the best of my knowledge, and that I understand that any misstatement of fact or misrepresentation of credentials may result in this application being disqualified from further consideration.

Signature:_____ Date:_____

Optional Information

The City asks that you voluntarily provide the following information. The City will use this information for statistical purposes, such as tracking the geographical diversity of board and commission appointees. By providing this information, you will help us ensure that appointments represent a broad cross-section of the community. You are under no legal obligation to provide this information. State and federal law prohibit the use of this information to discriminate against you. The City will treat this information as confidential to the fullest extent allowed by law.

Age: [ ] Under 18 [ ] 18-64 [ ] 65+

Race: [ ] African-American [ ] Asian [ ] Caucasian [ ] Hispanic [ ] Native American

Gender: [ ] Female [ ] Male

Disability: [ ] No [ ] Yes

If yes, please specify:_____