

Open Until June 22, 2015

Applicant Criteria

- Be able to attend monthly meetings on the 2nd Wednesday of each month, from 5:30 to 7:30 p.m. in Springfield
- Be willing to serve an up to 4-year term
- Live in Lane County OR represent a business or organization that operates in Lane County

| | | | |
|--------------------------------------|--------|------------------------|-----|
| Name: | | | |
| Residential/Business Address: | | | |
| | Street | City | Zip |
| Mailing Address: | | | |
| | Street | City | Zip |
| Home Telephone: | | Work Telephone: | |
| FAX: | | E-Mail: | |
| Employment: | | | |

The LaneACT is recruiting for the following positions:

- A Designated Stakeholder representing Environmental Land Use interests.
- A Designated Stakeholder representing Rail interests.
- An Other Stakeholder representing a wide variety of interests. (See Other Stakeholders below.)

Stakeholders will be appointed to 4-year terms and may be reappointed to subsequent 4-year terms by LaneACT.

Designated Stakeholders:

If you wish to apply for one of the Designated Stakeholder positions, please check ONLY ONE of the following boxes. You may apply for both a Designated and Other Stakeholder position.

| | |
|--------------------------|------------------------|
| <input type="checkbox"/> | Environmental Land Use |
| <input type="checkbox"/> | Rail |

Other Stakeholders:

If you wish to apply for one of the Other Stakeholder positions, please check one or more of the following boxes. You may apply for both Designated and Other Stakeholder positions.

| | | | | | |
|--------------------------|--|--------------------------|------------------------------------|--------------------------|-----------------|
| <input type="checkbox"/> | Airports | <input type="checkbox"/> | Public Transit Riders (Bus & Rail) | <input type="checkbox"/> | Public Safety |
| <input type="checkbox"/> | Business | <input type="checkbox"/> | Tourism | <input type="checkbox"/> | Neighborhoods |
| <input type="checkbox"/> | Public Health | <input type="checkbox"/> | Schools | <input type="checkbox"/> | Senior Citizens |
| <input type="checkbox"/> | Minorities | <input type="checkbox"/> | Special Transportation Needs | <input type="checkbox"/> | Environment |
| <input type="checkbox"/> | Parts of Lane County Not Otherwise Well Represented on LaneACT | | | | |
| <input type="checkbox"/> | Other Interests, Please Specify: | | | | |

(OVER)

Please answer the following questions. Attach additional pages if necessary.

1. Please describe how your background, training and experience prepare you to represent the appropriate stakeholder position(s). Include employment, educational, vocational and skill training, degrees and certifications, licenses, participation on boards and committees, memberships, life experience, etc.

2. If you are a member of an organization representing the appropriate stakeholder position(s), and/or if you have received an endorsement to serve on LaneACT from such an organization, please describe your membership(s) and/or endorsement(s).

3. Please provide any additional information about yourself which will help LaneACT select you.

In addition to answering the above questions, you may attach a resumé to provide additional information about yourself if you wish.

Thank you for applying to be a LaneACT Stakeholder!

Demographic Information (Optional):

The LaneACT collects information on race, color, national origin, and gender of applicants to the Commission to ensure the inclusion of all segments of the population affected by LaneACT. You have the option of providing this information. You may apply to be a LaneACT Stakeholder even if you do not wish to provide this information. This information will not be used in the selection process.

| | | | | | | | | | | | | | | |
|--------------------------|--|-------------------------------------|--------------------------|--------------------------|--------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------|--------------------------|-----|--------------------------|----|
| Gender | | Number of Persons in Your Household | | | | | | | | | | | | |
| Annual Household Income: | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Less than \$25,000 | <input type="checkbox"/> | \$25,000-\$44,999 | <input type="checkbox"/> | \$45,000-\$74,999 | <input type="checkbox"/> | More than \$75,000 | | | | | | | |
| Disability | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Senior | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Youth | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | African American | <input type="checkbox"/> | Hispanic | <input type="checkbox"/> | American Indian/Alaskan Native | <input type="checkbox"/> | Asian | | | | | | | |
| <input type="checkbox"/> | Native Hawaiian and other Pacific Islander | | | | <input type="checkbox"/> | Multiracial | <input type="checkbox"/> | White | <input type="checkbox"/> | Other | | | | |

Please Return Your Completed Application to:

Mail: **Mary McGowan, LCOG / 859 Willamette Street, Suite 500 / Eugene, OR 97401-2910**

E-Mail: MMcGowan@lcog.org

FAX: **(541) 682-4099 Attn: Mary**