

Transportation Disadvantaged Local Coordinating Board MEMBERSHIP APPLICATION

This application will be kept on file and remain active for two years from date received. Submit application to MetroPlan Orlando via email or mail. Questions? Call 407-481-5672 x315.

EMAIL: TDLCBapplication@MetroPlanOrlando.com

MAIL: TDLCB Application c/o MetroPlan Orlando, 315 E. Robinson Street, Suite 355, Orlando, FL 32801

YOUR CONTACT INFOR	MATION						
Name:							
Email:							
Phone:							
Please provide your home	and work add	ress (if appli	cable). Checl	k the box of you	r preferred ma	iling address.	
Home Address:							
Continuous resident of			since				
Employer:							
Work Address:							
YOUR TRANSPORTATION	ON INTERESTS	S					
Tell us about your tran	nsportation in	nterests an	d habits.				
Do you use the LYNX bu	ıs system?	YES (REG	GULARLY)	YES (OCCA	SIONALLY)	NO	
Do you use SunRail?	YES (REGUI	_ARLY)	YES (OCC	ASIONALLY)	NO		
Do you drive a car?	YES (REGULARLY)		YES (OCCASIONALLY)		NO		
Do you ride a bicycle?	ride a bicycle? YES (REGULARLY)		YES (OCCASIONALLY)		NO		
Do you walk in increme	YES (REGULARLY)		YES (OCCASIONALLY)		NO		

Do you have a passion for advocacy in any of the following areas (choose all that apply):

pedestrian safety

bicyclist safety

bus transit

rail transit

safe driving

persons with disabilities

students

seniors (over age 65)

business involvement in civic activities

other

Select seats you are qualified for and interested in filling (choose all that apply):

Multimodal advocates (persons advocating for various transportation options, such as bicycle, pedestrian, roadway, bus, passenger rail)

Underserved (low income persons and minorities)

Transportation disadvantaged (disabled or seniors over age 65)

Business community

DEMOGRAPHICS

The following information will be used to satisfy Equal Opportunity Act reporting and research requirements. These questions are voluntary.

Gender:

FEMALE

MALE

OTHER

Race:

WHITE

BLACK

HISPANIC/LATINO

AMERICAN INDIAN/ALASKAN NATIVE

ASIAN

NATIVE HAWAIIAN/PACIFIC ISLANDER

MULTIRACIAL OTHER

55-64

Do you have a physical disability?

YES

NO

Your age range:

18-24

25-34

35-44

45-54

65-74

75+

Is your household income at or below <u>U.S. Department of Health and Human Services poverty guidelines</u>? YES NO

Are you a student?

YES

NO

YOUR ABILITY TO SERVE

The TDLCB meetings are generally held four times a year on the second Thursday of the month at 10:00 a.m. Can you regularly attend meetings?

YES

NO

Can you serve a four-year term?

YES

NO

Are you willing to abide by Florida's Government-in-the-Sunshine laws and ethical guidelines? YES NO

Applications are public record and may be released to the public upon request.

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Have you previously served on a MetroPlan Orlando board or committee? YES NO If yes, which committee and when did you serve?

Do you have any potential conflicts of interest that might occur if you are appointed (see this conflict of interest form for details on what constitutes a conflict)? YES NO If yes, please provide details here.

Do you work in the transportation industry? YES NO UNSURE (if so, please list why below)

Are you an elected official? YES NO

STATEMENT OF INTEREST

Please use the space below to describe your reasons for wanting to join the Transportation Disadvantaged Local Coordinating Board (TDLCB). This information will help us create a committee that reflects the diversity of Central Florida. Please limit your response to 500 words or less. In preparing your statement of interest, consider the following:

- What type of role do you think you could play as part of the TDLCB?
- What kind of feedback do you think you can provide to MetroPlan Orlando?
- How would you update your community about what you learn as a TDLCB member?
- What interests, personal qualifications or previous experience do you have that will help you be a productive TDLCB member?

I attest that the information in this application is true to the best of my knowledge.

Signature Date

*Although not required, letters of recommendation are accepted and can be sent to CACapplication@metroplanorlando.com.

Non-Discrimination Policy

MetroPlan Orlando's work is conducted without regard to race, color, national origin, age, sex, religion, disability or family status. Persons wishing to express their concerns relative to MetroPlan Orlando compliance with <u>Title VI nondiscrimination</u> policy may do so by contacting:

Cynthia Lambert
Public Information Manager
MetroPlan Orlando (315 E. Robinson Street, Suite 355, Orlando, FL 32801)
CLambert@metroplanorlando.com

All inquiries or complaints will be handled according to MetroPlan Orlando procedure and in a prompt and courteous manner.

Accommodations for Disabilities and Language

In accordance with the Americans with Disabilities Act (ADA), if any person with a disability as defined by the ADA needs special accommodations to participate in this proceeding, he or she should contact MetroPlan Orlando staff member Ms. Cathy Goldfarb (contact info below), at least three days prior to the event. In addition, persons requiring translation services, which are provided at no cost, should also contact Ms. Goldfarb at least three business days prior to the event.

Contact Information:

Cathy Goldfarb | (407) 481-5672 x315 | Email: cgoldfarb@metroplanorlando.com Address: MetroPlan Orlando, 315 East Robinson Street, Suite 355, Orlando, Florida, 32801