

COMMUNITY ADVISORY COMMITTEE (CAC) APPLICATION Applications Due: October 30, 2018

Indicate which position you are applying for:		
☐ One-Year Term CAC Youth Position (☐ Three-Year Term CAC Position	age 15-19)	
Name:		
Home Address:		
Home Phone:	Cell Phone:	
Personal Email:		
Employer or School (if student):		
Work Address:		
Work Phone:	Work Email:	
If retired what was your previous occupation:		
How long have you lived in Thurston County:		
Please list all community groups you are affiliated with:		
Normally the commitment to this committee will require 3-4 hours per month. Can you commit this time to the CAC? No		
The group meets the third Monday of each month, 5:30 pm to 7:30 pm (except January and February which are changed to the second Monday to accommodate holidays; and September to meet with the Intercity Transit Authority). Are you available during this time? Yes No		
Meeting packets are distributed electron you receive your packet electronically?	ically in keeping with our commitment to sustainability. Can ☐ Yes ☐ No	
Do you have any special needs, i.e. transportation, interpreter, other? Please explain:		





Please answer the following que your answers if necessary.	estions – you may use a separate sheet of paper to supplement
	ion issues of importance or concern to you:
	ember of Intercity Transit's CAC? Please share any additional
information relating to your i	nterest and/or experience:
Indicate your general location	of residence/representation:
☐ City of Lacey	☐ City of Yelm
City of Olympia	☐ Thurston County
☐ City of Tumwater	☐ Other:
Indicate which of the following that apply):	g perspectives you think you bring to the Committee (check all
☐ Bicyclist	☐ Medical Community
☐ Business Representative	☐ Native American
☐ Chamber of Commerce ☐ Citizen-at-Large	Neighborhood AssociationRural Community
☐ Environmentalist	☐ Senior Citizen
☐ Local College Student	☐ Social Service Agency
☐ Local High School Student	Transportation Demand Management
Service User (check all that ap	oply):
☐ Carpool	Park and Ride Lots
☐ Community Van	☐ Star Pass Holder
Dial-A-Lift	☐ Vanpool
☐ Express Service ☐ Fixed Route	□ Village Vans□ Other
Applicant's Signature	Date:
Please mail this application to:	Intercity Transit ATTN: Nancy Trail
Or drop the application by: Fax to: (360) 357-6184 or email to:	PO Box 659, Olympia, WA 98507-0659 526 Pattison SE, Olympia 98501 ntrail@intercitytransit.com



Fax to: (360) 357-6184 or email to: ntrail@intercitytransit.com
For more information about the Citizen Advisory Committee, call Intercity Transit at 705-5857.



Voluntary Information

The Authority desires a broad representation of backgrounds and interests on the committee. The information you volunteer here, which will remain confidential, will assist in this goal.

Race:	
☐ American Indian/Eskimo☐ Asian/Pacific Islander☐ African American	☐ Caucasian ☐ Hispanic ☐ Other
Gender:	
☐ Female	☐ Male
Age:	
☐ 15 – 19 ☐ 20 – 30 ☐ 31 – 40	□ 41 − 50 □ 51 − 64 □ 65+
Disability: □ No □ Yes, if yes list	disability
To help us determine which methods of comheard about the CAC recruitment: High School Career Center Social Media	munication are most effective, please tell us how you
 ☐ Boys & Girls Clubs ☐ Intercity Transit Bus Board ☐ Other:	

