PEDESTRIAN ADVISORY COUNCIL APPLICATION FOR MEMBERSHIP

Name:

Address:		
City:	State:	Zip:
Preferred Phone:		Other Phone:
E-mail Address:		
Date of Birth (must b	e at least 18):	
Occupation:		Employer:

Summary Information:

The Pedestrian Advisory Council was formed in August 2013 and began meeting in August 2013. According to draft bylaws, "The Pedestrian Advisory Council (PAC) shall advise City of Austin on pedestrian planning, policy, design, funding, education, and enforcement efforts regarding the creation, maintenance and operation of pedestrian facilities in order to ensure a safe and enjoyable circulation for both commuting and recreation within the City of Austin. The PAC's goal is to ensure sensitivity to pedestrian issues in the design and implementation of all public and private projects impacting pedestrians."

The group will be comprised of 9 full-members and up to 10 alternate members. Agency representatives and community liaisons will be invited at a later date to be determined by the PAC.

Questions:

1. Do you reside or work within City of Austin boundaries? (Only those that live or work within the City of Austin are eligible for membership.)

🗌 No 🗌 Yes

2. The group will consider geographic diversity for representation. What area(s) of town are you particularly knowledgeable of within Austin?

3. Education (Schools attended, degrees earned, training received):

5. Affirmative Action information: This information is voluntary, and is being collected to consider diversity for Pedestrian Advisory Council membership.

Male Female Racial/Ethnic Background:

6. List any major paid employment and volunteer activities, which may relate to service on the Pedestrian Advisory Council: Dates (from/to) Employer/Volunteer Activities Responsibilities

7. Do you have any special skills or experience that will help you as a member of the Pedestrian Advisory Council?

8. Why do you want to serve on the Pedestrian Advisory Council?

In what ways do you identify as a pedestrian (check all that appl

I am a pedestrian as my primary mode of transportation.
I combine pedestrianism with biking and mass transit use.
I am a regular recreational pedestrian.
I am an occasional pedestrian for fun or exercise.
I am seldom a pedestrian but want to be more.
Other:

10. What issues or topics do you think the PAC should address?

11. Can you commit to being in attendance at Regular Meetings and working group meetings, as well as helping to complete the work of the PAC?

🗌 No 🗌 Yes

12. Are there any obstacles to you attending regularly scheduled meetings of the PAC? (Regular meetings occur the first Monday of every month. The PAC reserves the right to change the meeting dates, locations, and to call special meetings.)

🗌 No 🗌 Yes

If "yes", please explain:

13. Are you interested in being considered for a position as full term member, alternate member, or both? (Top vote earners will be elected as full members. Alternate positions will be determined after full members are elected.)

Full Member Only Alternate Member Only Both 14. Additional comments:

Please return completed application form by <u>5 PM, FRIDAY SEPTEMBER 18 2015 to:</u>

Pedestrian Advisory Council Staff Liaison Active Transportation Division - Austin Transportation Department P.O. Box 1088 Austin, TX 78767 512-974-7189 Direct Line <u>pedestrian@austintexas.gov</u>

*In order to be eligible to run for elections, individuals must have attended at least one Pedestrian Advisory Council meeting prior to the October 5, 2015 elections.

**This application will be uploaded to the PAC webpage and distributed in advance of the September 2015 meeting of the Membership Subcommittee for review and for consideration of candidate recommendations. The Membership Subcommittee will report to the full PAC on September 14th, 2015. Private information (email, address, phone number, etc.) will be blacked out.

Additional nominations will still be accepted from the floor at the October 5th, 2015 elections.