First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pronouns (e.g., he/him, she/her, they/them): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address (including zip code): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Which Community Budget Advisory Committee are you interested in joining? Please indicate a first choice (required) and a second and third choice (optional) from the list of departments below.

First Choice: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Second Choice: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Third Choice: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Department of Community Services
* Departments of County Assets & Management
* Non-Departmental (includes 16 small County offices)
* Department of County Human Services
* Department of Community Justice
* Multnomah County Sheriff’s Office
* Multnomah County District Attorney
* Health Department
* Multnomah County Library

When are you able to meet?

𝥁 Daytime 𝥁 Evening 𝥁 Both

𝥁 Other (please explain): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please tell us why you are interested in joining a Budget Advisory Committee. (About 500 words or less)

Please describe any past or current community involvement, including volunteer, committee, and board experience. Optional: please include any experience reviewing budgets.

Please state any potential conflicts of interest you may have related to any county department, if applicable. Ex. If you are an employee or a board member for an organization that receives county funding and/or has contracts with the County. Note that County employees are not eligible to serve on Budget Advisory Committees.

Please provide us with a summary of your work and volunteer experience.

You may provide a written response or attach a resume. If you wish to submit a formatted resume, you may attach it to this application or email it to community.involvement@multco.us.

Is there anything else you'd like us to know?

How did you find out about this opportunity?

Sign up for the Office of Community Involvement email list to receive updates about new volunteer opportunities on advisory boards & committees.

𝥁 Yes, please sign me up!

**Optional Questions**

The following questions are optional and are used by the Office of Community Involvement to track the effectiveness of our outreach efforts.

Date of Birth (Month/Day/Year):

Your Gender:

𝥁 Male

𝥁 Female

𝥁 Transgender (from male to female)

𝥁 Transgender (from female to male)

𝥁 Unknown

𝥁 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your race/ethnicity:

𝥁 American Indian or Alaska Native

𝥁 Asian

𝥁 Black or African American

𝥁 Hispanic or Latino/a

𝥁 Native Hawaiian or Pacific Islander

𝥁 White

𝥁 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return this application to:

Office of Community Involvement

501 SE Hawthorne Blvd., Suite 192 • Portland, Oregon 97214