

2021 Community Involvement Committee Application

Thank you for completing this Community Involvement Committee application. Please note that the information provided in this document is public information. If you have questions or would like to connect with staff in the Office of Community Involvement, feel free to call us at 503-988-3450 or send an email to community.involvement@multco.us. For an online application, visit multco.us/oci/cic.

Applications must be received no later than Wednesday, July 14th 2021 at 11:59pm.

Last Name:
Email:
ounty boards, commissions or committees? Please list
ne Year Appointed Year Term Ended

Why are you interested in joining the Community Involvement Committee? What perspective, experience, or skills do you hope to bring to the group?

Describe a time you were part of a group working towards a common goal. What were your contributions and how did you grow with that experience?
What has been difficult for you when working in groups where including all voices, working together across differences, and equity are critical values? How have you addressed those challenges?
The Community Involvement Committee is committed to reducing barriers to participation for communities that have been typically underrepresented in the County decision-making. Describe your experiences with local historically marginalized and underrepresented communities.
In your opinion, what are the top three barriers to civic participation and community involvement in county decision-making?

Please state any potential conflicts of interest you may have related to any county department, if applicable. Eg. If you are an employee or a board member for an organization that receives county funding and/or has contracts with the County.
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.
How did you learn about this opportunity?
Is there anything else you'd like us to know?

Optional Questions

effectiver	ness of our outreach efforts.
Date of B	irth:
Your Gen	der:
	Male
	Female
	Transgender (FTM)
	Transgender (MTF)
	Unknown
	Other:
Your race	e/ethnicity:
	American Indian or Alaska Native
	Asian
	Black/African American
	Hispanic or Latino/a
	Native Hawaiian or Pacific Islander
	White
	Other:
	Decline to Answer

The following questions are optional and are used by the Office of Community Involvement to track the