

## **Jefferson Transit Authority Board (JTAB)**

## Application/Statement of Interest

Name:			Date:	
Mailing Address.			Home Phone:	
City:	State:	Zip:	Work Phone:	
Email:			Cell Phone:	
Employer:		Occupation:		
School Board, PUD, Port or Hospital seat held:	Board or District		I reside in Commissioner District Number:  #1 #2 #3 check one	
Provide brief background info includi	ng education, job experi	ience, skills, hobb	ies and special areas of interest:	
Organizations/Affiliations:				
What community activities have you participated in the past and for what duration?				

Which boards, commissions, committees or task forces have you participated on? Include dates served:
Why are you applying for this appointment?
What issues do you see with Jefferson Transit, and how would you propose they be addressed?
What anguid drille Impervious on experience do you have to contribute to the ITA Doord?
What special skills, knowledge, or experience do you have to contribute to the JTA Board?

	Board members to have a diverse collecticational and community views. Describe	ve knowledge and commitment to all ethnic, your strengths in this area:
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=	y, are there on the time you would be ava e to devote to the JTA Board?	ilable for meetings and other activities? How
Additional information	you would like to provide about yoursel	c.
Additional information	you would like to provide acoust jourses.	1.
	oointment will entail my attendance at meeting dication is true to the best of my knowledge.	s and participation in activities of this Task Force. All of
Date		Signature of Applicant
Please return to:	Jefferson Transit	
	ATTN: JTA Board Application 63 Four Corners Road	or via email to:
	Port Townsend, WA 98368	kgraves@jeffersontransit.com