

## EOC Committee Membership Application

Individuals interested in becoming a member of a Committee of the Madison Equal Opportunities Commission are required to complete this application, attach their resume and submit the form to the Commission for its consideration.

Rule 1.5 of the Commission requires that committee membership "be representative of advocacy groups, residents, protected classes as contained in the [Equal Opportunities] Ordinance, private sector representatives and social service agencies as may have concern with the subject matter of the committee, and shall be committed to the principle of equal opportunities."

Section 3.27 Madison General Ordinance requires that committee members be residents of the City of Madison, unless the individual is "particularly well qualified by reasons of education, background, and experience with Madison business concerns or other Madison-based employers." Individuals who are not City residents may apply for "Affiliate" member status. Affiliate members may participate fully in discussions and committee projects, but do not have voting rights.

This application has been formulated to assure diversity on the MEOC's committees as well as to determine that applicants meet eligibility requirements.

Please fill in the application and forward it to:

Annie Weatherby, Education/Outreach Coordinator  
Madison Equal Opportunities Commission  
210 Martin Luther King, Jr. Blvd., Room 500  
Madison, WI 53703-3346

Date \_\_\_\_\_ Madison Ald. Dist. \_\_\_\_\_ Ward \_\_\_\_\_

Name \_\_\_\_\_

Home Address \_\_\_\_\_

Employer \_\_\_\_\_

Job Title \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone No. \_\_\_\_\_ Office Phone No. \_\_\_\_\_

Fax No. \_\_\_\_\_ Internet address \_\_\_\_\_



6. Please list any other activities or organizations in which you are involved that you believe are relevant to this appointment.

7. Equal Opportunity/Affirmative Action Data

In order to assure representation of all protected classes on MEOC committees, please indicate the protected classes of which you are a member:

- Race (Please specify)
  - African American
  - Asian
  - Hispanic
  - White
- Other \_\_\_\_\_
- Sex (Please specify)
  - female
  - male
- Age
  - 18-54
  - 55+
- Handicap (Please specify nature of disability: \_\_\_\_\_)
- Arrest or conviction record
- Less than Honorable Discharge from the Military
- Marital Status (Please specify)
  - single
  - married
  - divorced
  - widowed
- National origin or ancestry \_\_\_\_\_
- Physical appearance \_\_\_\_\_
- Religion \_\_\_\_\_
- Political Beliefs \_\_\_\_\_
- Sexual Orientation
- Source of Income
- Student

8. If you are not actually a member of a protected class, but feel that you can represent that group because of your employment or community activities, please provide specifics.

9. If you are disabled and require an accommodation to allow your full participation on the Committee, please describe the accommodation needed.

10. Please list any additional City committees you might be interested in serving on:  
(List no more than three - please be specific) *Committee Code (Office Use Only)*

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

11. Current Committee Service (Please list any **City of Madison** boards, committees or commissions on which you are currently serving - include ad hoc or subcommittee activities.):

*Committee Code - Position (Office Use Only)*

*Term Expires:* \_\_\_\_\_

*Term Expires:* \_\_\_\_\_

*Term Expires:* \_\_\_\_\_

Are you a City of Madison resident?	Yes	No
Are you a registered voter?	Yes	No
Do you hold an elective or appointed public position or office?	Yes	No
If yes, what position or office?	_____	

Signature of Applicant \_\_\_\_\_

**--Remember to attach a copy of your resume--**