**Seattle Human Rights Commission Appointment Application**

**Please attach a cover letter, resume, short bio, and include the neighborhood you reside in and your ethnicity (for statistical data) and additional pages if needed.**

Notice to Applicant: Your completed application is a public record under the Washington Public Records Act (PRA), Chapter 42.56 RCW, and is subject to public release upon request.  Certain information such as your residential address and personal telephone number may be redacted from documents prior to disclosure.

Name

|  |
| --- |
|  |

Home Address Business Address

|  |  |  |
| --- | --- | --- |
|  |  |  |

Home Phone Business Phone Cell Phone

|  |  |  |
| --- | --- | --- |
|  |  |  |

E-mail Address

|  |
| --- |
|  |

* Current employment: job title, employer, description of duties
* Human Rights Advocacy experience: organizations, dates, outcomes, reference individuals
* Organizational affiliations: describe involvement

|  |
| --- |
|  |

Reference (Name, Phone Number, E-mail) Reference (Name, Phone Number, E-mail)

|  |  |  |
| --- | --- | --- |
|  |  |  |

Any other professional or personal experience that you would like the Commission to know about

|  |
| --- |
|  |

**Expectations of Commissioners**

|  |  |  |
| --- | --- | --- |
| Are you willing to commit a minimum of 10 hours per month in Commission meetings and projects? | Yes | No |
| Are you willing to attend scheduled meetings, on the first Thursday of each month, 6:00 – 8:00 p.m.? | Yes | No |
| Are you available to attend meetings during normal business hours? | Yes | No |
| Are you available on weekends? | Yes | No |

**Statement of Purpose:** Why would you like to serve as a Commissioner for Human Rights? What do you hope to accomplish?

|  |
| --- |
|  |

By signing below, you are verifying that the information in this application is true and correct

Signature: Date

|  |
| --- |
|  |

**Optional**: To make certain we have the broadest array of voices from the human rights community, we ask you that you identify the categories that represent you or your areas of expertise. Please check all that apply and add additional items that you feel are appropriate.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Youth |  |  | Business |  |  | Health |  |
| Elder |  |  | Activist |  |  | Social Services |  |
| LGBTQ |  |  | Disability |  |  | Religion |  |
| Ethnic Minority |  |  | Media |  |  | Homeless |  |

Email to: [marta.idowu@seattle.gov](mailto:marta.idowu@seattle.gov), **or**

fax to: (206) 684-0332, **or**

mail to: Seattle Human Rights Commission

810 Third Avenue, Suite 750

Seattle, WA 98104-1627