

**SACRAMENTO REGIONAL TRANSIT DISTRICT
MOBILITY ADVISORY COUNCIL
ORGANIZATIONAL MEMBER APPLICATION**

THANK YOU FOR YOUR INTEREST IN APPLYING FOR MEMBERSHIP ON THE SACRAMENTO REGIONAL TRANSIT DISTRICT (SacRT) MOBILITY ADVISORY COUNCIL. MEMBERS OF THE MOBILITY ADVISORY COUNCIL WILL BE EXPECTED TO:

- Advise on system accessibility features and improvements
- Provide a communications link between any group(s) they represent, SacRT management and the Board of Directors
- Represent their interest/expertise area to SacRT
- Attend a majority of all monthly meetings
- Read and review agenda packets and reports in advance of meetings
- Read reports, deliberate findings and strive for consensus and conclusion on issues
- Have or be willing to gain knowledge of the public transportation system

PLEASE PROVIDE US WITH THE FOLLOWING INFORMATION. ALL INFORMATION WILL BE KEPT CONFIDENTIAL.

Name: _____ Phone Number/TTY _____

Organization (if applicable) Address-

E-Mail _____

What other organizations or committees have you served on or been affiliated with?

Organization	Position(s) Held	Length of Time Affiliated	Number of Members in Group
A.			
B.			
C.			
D.			

The Mobility Advisory Council is looking for members who are leaders in their community and/or within their respective organizations. Please describe your leadership experience and/or ways you are a leader within your organization. How would you describe your leadership style? _____

The Mobility Advisory Council is an advisory (not decision-making) body. What are some of the important issue areas you could help advise SacRT on? _____

Council Members must have excellent listening and communication skills – for communicating with SacRT Boards and Staff, with the general public, and for bringing issues from and to members of your organization or community. How will you share information with your members on a regular basis? _____

What is the most important contribution that you could make to the Mobility Advisory Council? _____

Using only the space provided, please explain why you are interested in serving on the Sacramento Regional Transit Mobility Advisory Council. _____

We would appreciate receiving a brief letter of endorsement from the organization that you propose to represent, signed by the President or Chair.

Please mail for fax to:

Accessible Services
Sacramento Regional Transit District
P.O. Box 2110
Sacramento CA 95812-2110
FAX 916-455-3924