

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.

First Name:	Last Name:						
Pronouns (e.g., he/him, she/her, they/them)	:						
Phone:	Email:	_					
Home Address (including zip code):							
Occupation & Employer (if applicable):							
Have you served on any other Multnomah County boards, commissions or committees? Please list them below.							
Board, Commission or Committee Na	me Year Appointed Ye	ear Term Ended					

Why are you interested in joining the Community Involvement Committee?

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 perspective, experience, or skills do you hope to bring to the group? What has been difficult for you when working in groups when including all voices, working together across differences, and equity are critical values?
Describe your connections 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?

Optional Questions

☐ Multiracial

□ Other: _____

The following effectiveness			nd are used by	the Office of	Community I	nvolvement to trac	k the			
Your Age:										
□ und	der 25	□ 25-34	□ 35-44	□ 45-54	□ 55-65	□ over 65				
Your Gender	r:									
□ Ма	ıle									
□ Fei	male									
□ Tra	□ Transmasculine (Transman, Transgender Male, Female-to-Male)									
□ Tra	Transfeminine (Transwoman, Transgender female, Male-to-Female)									
□ Ge	Genderqueer, Gender Non-Conforming or Non-Binary									
□ Tw	o Spirit									
□ Qu	estioning									
□ Oth	ner:									
Your race/eth	hnicity:									
□ Am	nerican India	n or Alaska N	ative							
□ Asi	ian									
□ Bla	ack or Africa	n American								
□ His	spanic or Lat	tino/a/x								
□ Na	tive Hawaiia	n or Pacific Is	lander							
□ Wh	nite									