APPLICATION FOR ENDORSEMENT TO THE GOVERNOR

FOR APPOINTMENT TO THE

NORTH CAROLINA COUNCIL ON DEVELOPMENTAL DISABILITIES

(Additionally, an Application for Boards and Commissions (pdf) is required by the Office of the Governor)

(Please type of	or print legibly.)		
NAME:			
	First	Middle	Last
TELEPHONE	:: HOME ()	BUSINESS ()
	FAX ()	E-MAIL	

BACKGROUND INFORMATION

This endorsement is for the following category:

____An individual with developmental disabilities/self-advocate

_____A parent or guardian of a child (0-21) with developmental disabilities

____An immediate relative or guardian of an adult with developmental disabilities

____An immediate relative or guardian of an adult with a developmental disability who resides or previously resided in an institution

_____Representative of a local and non-governmental agency, or private, not-forprofit group concerned with services to persons with developmental disabilities

If parent or guardian of a child with a developmental disability, please provide child's age:_____

Please tell us about yourself/the candidate. Briefly discuss how you/the candidate became interested in disability issues, and present or past involvement in disability advocacy.

DEMOGRAPHIC INFORMATION: (optional)

DATE OF BIRTH:_____ SEX:___Male___Female

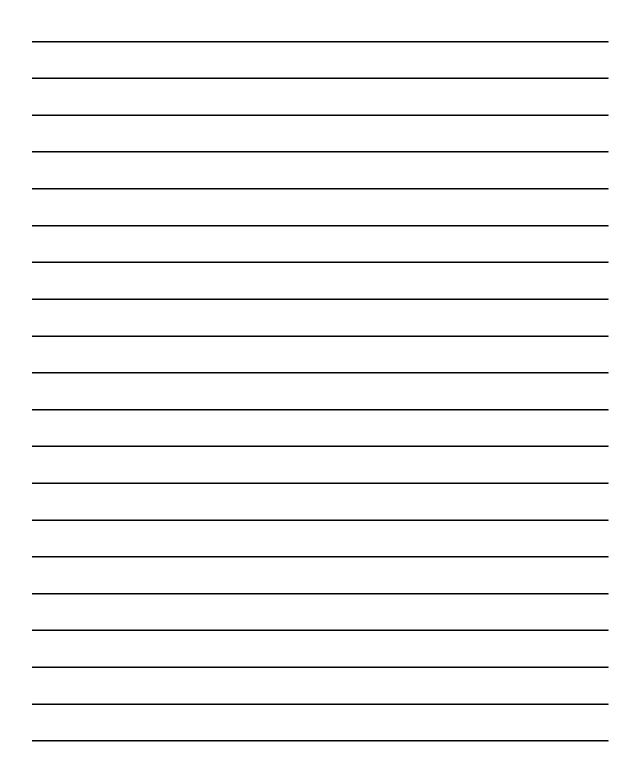
ETHNIC GROUP: (This information is helpful in endorsing applicants of culturally diverse backgrounds.)

- White
- Black (African-American)
- Hispanic (Mexican, Puerto Rican, Cuban, Central or South American, other)
- Asian (including Pacific Islander)
- American Indian (including Alaskan native)
- Other _____(optional specify)

Page 2 <u>I WANT TO BE CONSIDERED FOR ENDORSEMENT TO THE NC COUNCIL</u> <u>ON DEVELOPMENTAL DISABILITIES BECAUSE:</u>

(What skills and interests would you bring to the Council?)

(Please keep to 1 page)



POSITION QUESTIONS

(Please give brief answers.)

1. What do you believe are the two or three most important issues for people with developmental disabilities and their families? Please explain.

2. What activities should an organization such as the Council undertake to address these issues?

Please return this application and other material--(résumé, vita, or personal/family history, optional) and any letters of recommendation by email to info@nccdd.org, or by US mail to the following address:

NC Council on Developmental Disabilities 2010 Mail Service Center Raleigh, NC 27699-2010 (Voice/TDD) (919) 527-6500 (Toll Free) (800) 357-6916 (FAX) (919) 715-0325

Page 4