

## Application for the Citizen Oversight Panel



Created in 1997, the Citizen Oversight Panel (COP) independently monitors Sound Transit and its commitment to build and operate the region's high-capacity transit system.

The Sound Transit Board of Directors appoints and tasks COP members with asking hard questions, reviewing details and reporting findings back to the board. Its 15 citizen-volunteers represent a variety of interests, professional expertise and experience. Panel members are appointed to a four-year term, and limited to a maximum of two terms.

### Personal Information

Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

Work Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Eligibility

Do you work or live within the Sound Transit district? (See page 4 for a map of the district). Circle one: **Yes No**

Are you a registered voter within the Sound Transit district? Circle one: **Yes No**

Are you able to attend meetings twice each month from 8:30am-11:00am? (To limit the spread of COVID-19, the panel is currently meeting virtually. In the future, meetings will alternate between virtual and in person meetings held in Seattle. Virtual attendance is an option for the in person meetings if needed.) Circle one: **Yes No**

Do you work for Sound Transit, or do you have a direct role in a contract your employer has with Sound Transit? Circle one: **Yes No**

### Experience (Feel free to attach extra pages if needed for any question.)

Please check the box next to the skills you would bring to the Citizen Oversight Panel:

- |  |   |
|--|---|
| <input type="checkbox"/> Business Management                 | <input type="checkbox"/> Financial Management                     |
| <input type="checkbox"/> Engineering                         | <input type="checkbox"/> Large Projects Construction Management   |
| <input type="checkbox"/> Public Facilities & Services        | <input type="checkbox"/> Government Processes                     |
| <input type="checkbox"/> Public Policy Development or Review | <input type="checkbox"/> Other (please explain in question below) |

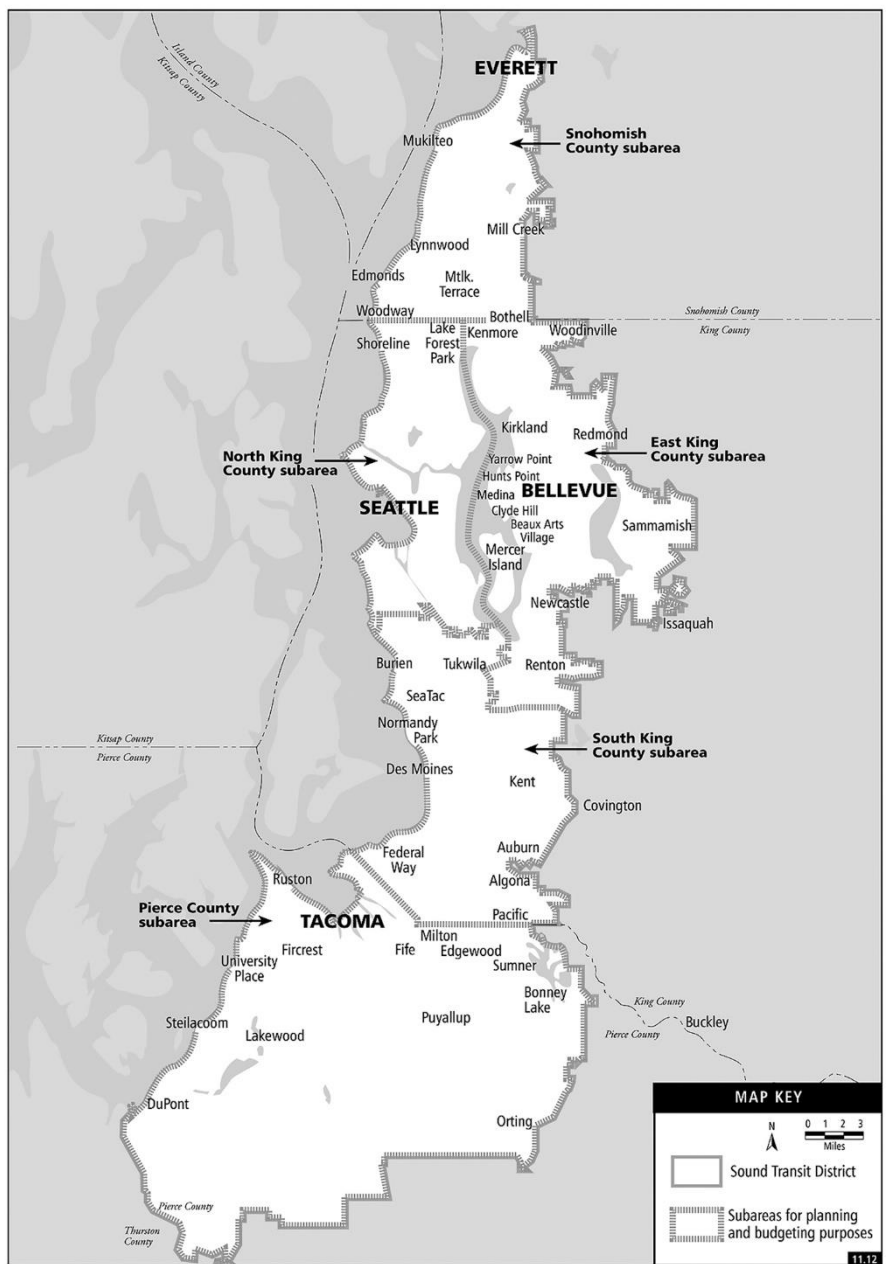
Please explain why you would like to serve on the Citizen Oversight Panel:

Please provide information about your experience and/or skills in one or more areas of expertise related to the panel's responsibilities—business and finance management, engineering, large projects construction management, public facilities and service, government processes, and public policy development or review. If you selected "other" above, please explain:

Sound Transit is committed to advancing civil rights, equity & inclusion for our employees, passengers and the community - where everyone is connected to what they need and have equitable access to opportunities, programs & services. Please share why this commitment is important and how your participation on this oversight panel would help to monitor this commitment.

Please review the attached Citizen Oversight Panel Guiding Principles and Sound Transit ethics policy. Based on the principles and policy, please describe any conflict of interest that would impair your ability to objectively serve on the Citizen Oversight Panel:

**Please attach a current resume or summary of relevant experience to this form.**



## Citizen Oversight Panel Voluntary Self Identification Survey

*This survey is optional. The information will be collected separately to provide an understanding of the demographic details of the applicant pool as a whole.*

### **Gender** (please select one)

- ☐ Female
- ☐ Male
- ☐ Non-binary
- ☐ Other (ideally "I prefer to self-describe" with text box)
- ☐ Prefer not to disclose

### **Race/ Ethnic Origin** (please select any that apply)

- ☐ American Indian or Alaska Native
- ☐ Asian or Asian American
- ☐ Black or African American
- ☐ Caucasian/White
- ☐ Hispanic/Latinx
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ Other, please specify
- ☐ Prefer not to disclose

### **Veteran Status** (please select one)

- ☐ Veteran
- ☐ Non-Veteran
- ☐ Prefer not to disclose

### **Diverse Abilities** (please select one)

- ☐ I have a disability
- ☐ I do not have a disability
- ☐ Prefer not to disclose