



**CITIZENS ADVISORY COMMITTEE  
MEMBERSHIP APPLICATION**

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

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

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Mailing Address: *(If different from above)* \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Place of residence:  Duval County  Clay County  St. Johns County  Nassau County

How long have you resided in this location? \_\_\_\_\_

Are you presently employed by a government agency?  Yes  No

Occupation \_\_\_\_\_

Outline your experience related to activities for this appointment?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list past civic and professional accomplishments or honors.

\_\_\_\_\_  
\_\_\_\_\_

Can you attend the CAC monthly meetings?  Yes  No

If a membership vacancy is not available on the CAC, may we submit your application when one occurs?  Yes  No

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Submit to: North Florida Transportation Planning Organization  
980 North Jefferson Street  
Jacksonville, FL 32209  
C/O Marci Larson, Public Affairs Manager