

1. Organization:	
2. Name:	3. Title:
4. Names of the relevant organizations with which you are affiliated:	
5. Relative Experience (Briefly describe in the space below your experience as an advisor on strategic planning or transportation planning projects, and specifically as an advisor or a planner for bicycle and/or pedestrian facilities):	
6. Have you ever served on a City-sponsored citizen or stakeholder advisory committee, or otherwise been involved with a City project or initiative? <input type="checkbox"/> Yes <input type="checkbox"/> No	
6a. If you answered yes to Question 5., please use the space below to name the City project or initiative, briefly describe your role, and provide a City contact person (if possible).	
7. How do you expect to have an impact on the Plan as a Bicycle Advisory Committee member? What resources and knowledge (not yet mentioned above) do you bring to this planning effort? Please briefly explain in the space below.	
8. If selected, would you be willing to meet as often as once a month for three hours, and provide advocacy and promote the plan outside of these meetings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Please provide any additional and relevant information on a separate page or pages.