

Portland Commission on Disability (PCoD) Overview and Expectations For Commissioners

Mission: To guide the City in ensuring that it is a more universally accessible city for all.

Background: The Portland Commission on Disability was created by a resolution that was passed by City Council in December, 2008, to further the work that the Portland Citizens' Disability Advisory Committee had been doing and to better engage the disability community in actively participating in city government.

Expectations for Commissioners:

- Attend and participate in the bimonthly Commission meetings (6 per year)
- Attend meetings and actively participate on at least one standing subcommittee of the Commission
- Demonstrate dedication and commitment to the Portland Commission on Disability's mission
- Help communicate and promote the Portland Commission on Disability's mission and guiding principles to the community

Terms of Service:

- Commissioners are to serve a 3-year term which may be renewed for a maximum of two consecutive terms, pending approval by the City Council.
- There is no monetary compensation made to Commissioners for their service as such.

Qualifications:

- Must live, work, be currently enrolled in school, or actively participate in cultural, civic or social organizations within the City of Portland or Multnomah County
- Have knowledge of disability issues
- Have an authentic experience and commitment to the disability community
- Be a team player and have the ability to work well with other people
- Access to e-mail is **highly** recommended *

Additional Information:

- As part of the application process and in the best interests of the Commission, potential applicants are advised to attend one full Commission meeting and at least one subcommittee meeting of their choice prior to submitting their application. There is no expectation of participation by prospective applicants at these meetings, but rather this simply affords an opportunity to interested persons to observe the business and work of the Commission. Potential applicants may consider how their skills and knowledge may be best utilized in the commission's work. Applicants who attend the meetings as requested will receive priority consideration by the executive committee. A calendar of upcoming meetings is available on the commission's website at <http://portlanddisability.com/calendar/>.

- You may keep this overview sheet for your records. Please submit the rest of this document (pages 2-8) along with your biography or resume and letters of reference to the address or e-mail listed on the top of page 4.

Application for Membership on the Portland Commission on Disability

The purpose of this form is to obtain information for use in making membership selections for the Portland Commission on Disability. Please attach a biography or resume of no more than 1500 words to this form.

Two letters of reference are required for **all** applicants. **Applications are reviewed at Executive Committee meetings which occur the first Monday of each month. Qualifying applications are accepted as position vacancies become available.** Thank you for your interest!

The Portland Commission on Disability is limited to 23 Commissioners. The 23 positions are At-large positions. Because the commission on disability strives to represent the broadest possible spectrum of disabilities, it will help us to know what your specific interests are and/or any affiliations you have to organizations serving the disability community. Please indicate in the following list your disability interests and/or affiliations.

Please mark the box(es) below designating the position(s) for which you are applying. If you are applying as an organization/agency representative, please list the organization name in the box at the end of the list.

	Org/Agency representing Disability Law issues (Example: Disability Rights Oregon)
	Org/Agency representing Housing issues
	Org/Agency representing Transportation issues (Examples: Ride Connection, CAT)
	Rep. from a Multnomah County Disability Advisory Committee (Example: DSAC)
	Org/Agency representing Employment issues (Example: State Vocational Rehabilitation Services)
	Org/Agency representing Mobility Impairment issues
	Org/Agency representing Blind/Low Vision issues (Example: Oregon Commission for the Blind)
	Org/Agency representing Health Care/Health Support Services (Examples: WowDHEC, caregiver organizations)
	Org/Agency representing Elder issues (Example: Elders in Action)
	Org/Agency representing Deaf/Hard of Hearing issues (Example: Oregon Commission on Deaf and Hard of Hearing)
	Org/Agency representing Mental Health issues (Examples: Icarus Project, Cascadia, NAMI)
	Org/Agency/Individual committed to Youth with disabilities issues (Examples: Multnomah County Youth Commission, Parents of children with disabilities) (2 positions)

List continued on next page

	University/College disability program or organization
	Org/Agency representing Veterans' with disability issues
	Org/Agency representing Developmental and Cognitive disabilities (Examples: ARC of Multnomah County, Autism Society of Oregon, NWDSA)
	Org/Agency committed to issues related to person with Chronic Health Conditions and/or Non-apparent Disabilities (Examples: National MS Society, Parkinson's Resources, ALS Foundation, Cascade Aids Project, Crohn's and Colitis Foundation, American Heart Association)
	Org/Agency dedicated to Multi-Cultural Minority Communities , including but not limited to Latino, African American, Native American, Immigrant and Refugee, Asian and South Pacific Islander, LGBTQ, etc.

As noted on the oversheet (page 1) of this application, potential applicants are strongly encouraged to attend one meeting of the full Commission and at least one subcommittee meeting of their choice prior to submitting an application.

To help the executive committee process your application, please indicate which meetings you attended (including date) and any thoughts or feedback you have on those meetings.

Full Commission meeting on _____

Subcommittee meeting on _____

Comments:

Please answer the following questions. Limit each response to 250 words or less.

Please describe your interest in serving as part of the Portland Commission on Disability. What do you hope to contribute? What do you hope to accomplish?

Tell us about your skills, knowledge, and experience in advocating for persons with disabilities or any other marginalized communities (including, but not limited to: people of color, non-English speakers, LGBTQ, homeless and economically challenged, etc).

Describe your involvement in the disability community or other community organizations.

Please describe any personal qualities or skills that you would bring that would enhance the success of the City of Portland's Commission on Disability (e.g. good sense of humor, website design, public speaking, etc.)

* A good portion of the work of the Commission will be done between meetings through e-mail discussions. Are you able to utilize email as a regular method of communication?

Please keep my application on file. I would like to be considered for future available positions on this or other City Commissions or Committees.

My signature affirms that all the information contained herein is true to the best of my knowledge and that I understand that any misstatement of fact or misrepresentation of credentials may result in this application being disqualified from further consideration.

Signature _____ Date _____
Applicant

Name: _____ Date: _____
Application assistant (if any)

To help ensure equal access to City programs, services and activities, the City of Portland will reasonably modify policies/procedures and provide auxiliary aids/services to persons with disabilities. This application can be obtained in alternate formats. For an alternate format or other assistance in filling out this application, please contact Patrick Philpott at patrick.philpott@portlandoregon.gov or (503) 823-2036 or TTY (503) 823-6868.

[Please note this optional information must remain on a separate page from the rest of the application.](#)

OPTIONAL INFORMATION

The City asks that you voluntarily provide the following information. The City will use this information for statistical purposes, such as tracking the geographical diversity of board and commission appointees. By providing this information, you will help us ensure that appointments represent a broad cross-section of the community.

You are under no legal obligation to provide this information. State and federal law prohibit the use of this information to discriminate against you. The City will treat this information as confidential to the fullest extent allowed by law.

Age: **Under 18** **18-64** **65+**

Race: (check one)

- African American or Black**
- Spanish, Hispanic, or Latino/a**
- American Indian or Alaska Native**
- Asian (Asian Indian, Chinese, Japanese, Korean, or other Asian)**
- Caucasian or White**
- Hawaiian or other Pacific Islander**
- Some other race:** _____
- Two or more races:** _____

Gender: **Female** **Male**

Disability: **No** **Yes**