

# PBOT

PORTLAND BUREAU OF TRANSPORTATION

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Dan Saltzman Commissioner Leah Treat Director

## BICYCLE ADVISORY COMMITTEE DESCRIPTION

### About PBOT

The Portland Bureau of Transportation (PBOT) is a community partner in shaping a livable city. We plan, build, manage, and maintain an effective and safe transportation system that provides people and businesses access and mobility. We keep Portland moving. For more information, visit us online at <https://www.portlandoregon.gov/transportation/>.

### About the Bicycle Advisory Committee (BAC)

The City of Portland Bicycle Advisory Committee advises the Mayor and City Council and all departments of the City on all matters relating to issues that affect bicyclists. The BAC regularly reviews and makes recommendations on transportation projects, advises City staff on funding priorities, public outreach, and program activities as well as planning and policy issues that affect bicyclists. The BAC is comprised of thirteen (13) volunteer members (and seven (7) volunteer alternate members), appointed by the Transportation Commissioner to serve three-year terms.

*The purpose of the Committee is to advise the Mayor, City Council, and all departments of the City on all matters relating to the use of the bicycle as a means of transportation and recreation.*

### Member Responsibilities

- Prepare for, attend, and participate in monthly BAC meeting
- Serve as liaison to specific transportation-related projects and programs
- Additional involvement with bicycle subcommittee work and events

### Time Commitment

- One evening per month for BAC meeting
- Other project and planning meetings as required for individual member portfolio assignments
- Drafting of BAC correspondence and position papers as needed
- Occasional testimony before city advisory committees, neighborhood associations, Planning Commission, City Council, etc.

### Necessary Skills

- Familiarity with bicycle infrastructure and encouragement in the city of Portland
- Ability to communicate effectively and courteously in a group setting
- Ability to critically evaluate technical information
- Past participation with other volunteer groups desirable
- Creative and dynamic problem solving



*The Portland Bureau of Transportation fully complies with Title VI of the Civil Rights Act of 1964, the ADA Title II, and related statutes and regulations in all programs and activities. For accommodations, complaints and information, call (503) 823-5185, City TTY (503) 823-6868, or use Oregon Relay Service: 711.*

## Time Commitment

Members of the BAC will be expected to fulfill the following time commitments:

1. **Meetings:** Committee members will be required to attend a 2-hour monthly meeting on the second Tuesday of every month.
2. **Tenure:** Committee members will serve a three-year term from January 2017 until December 2020 with opportunity to renew for future terms.
3. **Other:** Committee members will be expected to be responsive to staff and facilitator requests and review materials in advance of meetings. Committee members may also be invited to participate in other PBOT meetings and public events (optional).

## Public Official Conflict of Interest Notice

Those selected to serve on this body will be legally considered public officials for the duration of their service. As such, they will be required to publicly disclose potential conflicts of interest if the body votes on a recommendation that could have a financial impact for yourself, or a relative, or a business with which you or the relative is associated. This body is not the final decision maker, therefore members of the body do not have an actual conflict of interest; however, members could have a potential conflict of interest.

If potential conflicts of interest are not disclosed, individual members are subject to education or monetary sanctions from the Oregon Government Ethics Commission. Having potential conflicts of interest does not preclude you from serving on this body or impact your ability to participate fully on this body. Stakeholders often have potential conflicts of interest just out of the nature of being a stakeholder and having interest in the work PBOT is doing. Please be aware that if selected to serve, you will be asked to disclose all potential conflicts of interest.

## Selection Overview

Applications will be reviewed by PBOT staff and approved by the Commissioner responsible for the Bureau of Transportation, based on recommendations from a subcommittee of the Bicycle Advisory Committee. Selections will be confirmed the week of December 12, 2017 and meetings will begin in January 2018.

The selection team will work to ensure a diversity of members, including but not limited to, various neighborhoods, modal interests, business liaisons, transportation professionals, school districts and advocates from our most vulnerable communities.

## Application Process

Please complete and submit the following application to express your interest in the Portland Bicycle Advisory Committee. Please note that information provided in this document is public information, with the exception of the Optional Information section. (Information in the optional section will only be disclosed as required by law.) If you have a recently prepared biography or résumé, it may be submitted with the completed application, but is not required. Thank you for your interest in the Oversight Committee.

### **BICYCLE ADVISORY COMMITTEE APPLICATION**

*The following information is required in order to be considered for the Bicycle Advisory Committee.*

**Applications must be submitted by 5:00pm on November 3<sup>rd</sup> for consideration through one of three options:**

1. Email the completed form to [daniel.soebbing@portlandoregon.gov](mailto:daniel.soebbing@portlandoregon.gov).
2. Mail or walk in to PBOT, Attn: Daniel Soebbing, 1120 SW Fifth Ave, Suite 800, Portland, OR 97204
3. Complete the online version of the application in [Google Forms](https://goo.gl/forms/JvihRoFpMjWSImAE2):  
<https://goo.gl/forms/JvihRoFpMjWSImAE2>

**APPLICATION FOR MEMBERSHIP  
CITY OF PORTLAND BICYCLE ADVISORY COMMITTEE  
(APPLICATION DUE NOVEMBER 3, 2017)**

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work/School/Message: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

1. Do you reside within City of Portland boundaries?  Yes  No

2. Do you currently hold elective office?  No  Yes \_\_\_\_\_

3. This committee will include individuals with experience and expertise on the following geographies and topics. **Please check all that apply.**

<input type="checkbox"/> Resident of Southwest Portland	<input type="checkbox"/> Resident of North Portland
<input type="checkbox"/> Resident of Northwest Portland	<input type="checkbox"/> Resident of Northeast Portland
<input type="checkbox"/> Resident of Southeast Portland	<input type="checkbox"/> Resident Outer East Portland
<input type="checkbox"/> Pedestrian or Representative of a Pedestrian Organization	<input type="checkbox"/> Transit Rider or Representative of a Transit Organization
<input type="checkbox"/> Bicycle Rider or Representative of a Bicycle Organization	<input type="checkbox"/> Person with Disabilities or Representing a Disability Organization
<input type="checkbox"/> Freight Driver or Representative of a Freight Organization	<input type="checkbox"/> Non-profit Focused on Communities of Color and Low Income Communities
<input type="checkbox"/> Person with child or children	<input type="checkbox"/> Person who is renting
<input type="checkbox"/> Transportation Planning / Construction	<input type="checkbox"/> Bicycle Focused Business
<input type="checkbox"/> Business with 1 - 50 Employees	<input type="checkbox"/> Business with 50+ Employees
<input type="checkbox"/> Other Experience or Expertise:	

4. List any major paid employment and community volunteer activities, which may relate to service on the Bicycle Advisory Committee:

*Dates (from/to)*

*Employer/Volunteer Activities*

*Responsibilities*

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5. What skills or experience will you bring as a member of the Bicycle Advisory Committee?

*attach response on an additional page*

6. Why do you want to serve on the Bicycle Advisory Committee?

*attach response on an additional page*

7. List names, addresses, and phone numbers of *two* people who may be contacted as references:

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8a. Describe your bicycle use (check all that apply):

- I bike for transportation year-round
- I bike for transportation in good weather
- I am a regular recreational rider
- I occasionally ride for fun and/or exercise
- I bike with my family
- I seldom ride my bike

8b. What parts of the city do you typically ride in/through?

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9. Additional comments:

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## AGREEMENTS

- I have read, understand and am willing to fulfill the roles of the Bicycle Advisory Committee.
- I have read, understand and am willing to fulfill the time commitment of the Bicycle Advisory Committee.
- I have read, understand and am willing to comply with the Public Official Conflict of Interest disclosure requirements.
- I affirm that all information contained herein is true to the best of my knowledge. I understand that any misstatement of fact or misrepresentation of information may result in this application being disqualified from further consideration.

Print Name \_\_\_\_\_

Date \_\_\_\_\_

## OPTIONAL DEMOGRAPHIC INFORMATION

*Please note this optional information must remain on a separate page from the rest of the application.*

The City asks that you voluntarily provide the following information. The City will use this information for statistical purposes. 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.

Gender Identity			
Sexual Orientation			
Race			
Ethnicity			
National Origin			
Age			
Disability	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, please specify:
Languages Spoken			
Highest Level of Education	<input type="checkbox"/> High school degree or less <input type="checkbox"/> Some college / technical / community college / 2- year degree <input type="checkbox"/> College degree <input type="checkbox"/> Post graduate		