

## **CITY OF PORTLAND ADVISORY BODY**

### **APPLICATION FORM 2019**

Thank you for your interest in serving as a member of a City of Portland advisory body.

This form is designed to collect information from individuals who are interested in serving on a City advisory body. It includes the following required sections: General Information, Application Questions and a Conflict of Interest Disclosure Form. Please note that information provided in any of these sections is public information.

At the end of the application form, there is a voluntary and confidential section entitled Confidential Demographic Information Form. Any information provided under this section will only be disclosed as required by law. The City uses demographic information to identify larger patterns so that it may better engage and serve diverse populations.

To apply, please first review information about the advisory body for which you're applying, as well as the position description, applicant qualifications and expectations. If you are interested in applying for more than one advisory body, please submit individual applications for each one, as each body has a specific set of work and selection process.

To be considered for the PBOT Fixing Our Streets Oversight Committee, please be sure to submit a completed and signed application form, and your resumé if available. Applications should be sent to [fixingourstreets@portlandoregon.gov](mailto:fixingourstreets@portlandoregon.gov) If you have questions and/or need assistance in completing this form, please contact the Portland Bureau of Transportation at 503-823-5069 or send an email to [fixingourstreets@portlandoregon.gov](mailto:fixingourstreets@portlandoregon.gov)

The City of Portland is committed to diversity and equity and encourages people who are diverse in terms of race, ethnicity, disability, gender identity, sexual orientation, national origin, age, religion and geographic identification to apply.

**GENERAL INFORMATION**

Applicant name:

Do you live, work, play, go to school or worship in the City of Portland?

Yes     No

Neighborhood (if known):

Email:

Daytime phone:

Mailing Address:

Occupation (if available):

Name of the advisory body you are applying for:

If applicable, please identify any PBOT programs or advisory committees that you currently serve on?

## **ACCOMMODATIONS**

In compliance with Civil Rights laws, it is the policy of the City of Portland that no person shall be excluded from participation in, denied the benefits of, or be subjected to discrimination in any City program, service, or activity on the grounds of race, color, national origin, or disability. To help ensure equal access to City programs, services, and activities, the City of Portland reasonably provides: translation and interpretation services, modifications, accommodations, auxiliary aids and services, and alternative format.

For these services, complaints, and additional information, contact the staff contact Emily Tritsch at 503-823-5069 or [Emily.Tritsch@portlandoregon.gov](mailto:Emily.Tritsch@portlandoregon.gov) You may also contact the Office of Community & Civic Life at (503) 823-4519 or [advisorybodies@portlandoregon.gov](mailto:advisorybodies@portlandoregon.gov), use City TTY 503-823-6868, or Oregon Relay Service: 711.

## **APPLICATION QUESTIONS**

Please answer the following universal questions.

Please review information about the advisory body for which you're applying at

[www.portlandoregon.gov/civic/56150](http://www.portlandoregon.gov/civic/56150)

1. Describe your relevant skills, knowledge, and lived experience as well as any volunteer, work, and/or educational experience that would serve the advisory body's ability to meet its mission.
2. What excites you about the possibility of serving on this advisory body?
3. What important perspective would you bring to discussions about transportation in Portland?
4. If selected and appointed to serve, what would you hope to accomplish during your service?



My signature affirms I can commit to participate fully in the work of the advisory body I'm applying for. All information contained herein is true to the best of my knowledge, and I understand that any misstatement of fact or misrepresentation of credentials may result in this application being disqualified from further consideration.

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Signature

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Date

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Print Name

## **CONFLICT OF INTEREST DISCLOSURE FORM**

Members of City advisory bodies are public officials, based on State law ORS 244.020(15), and as such are required to disclose conflicts of interest. Under Oregon Revised Statute 244.020(3), an appointee has conflict of interest when participating in an official action which could or would result in a financial benefit or avoidance of detriment to the public official, a relative of the public official, or a business with which either is associated.

Additionally, Portland City Code Chapter 1.03, Code of Ethics, requires advisory board members to uphold a specific standard of behavior. This language is included as part of this form and will also be provided as part of your training. Public officials also need to observe the Oregon Government Ethics Commission's "Oregon Government Ethics Law - A Guide for Public Officials", booklet available at [www.oregon.gov/OGEC/Pages/training.aspx](http://www.oregon.gov/OGEC/Pages/training.aspx)

**Please refer to the Definitions page and answer the following questions**

1. Are you or is a relative associated with a business, as defined by ORS 244.020(3)(4), that is related to the subject matter to be considered by this advisory body? Please explain.

Yes       No

2. Even if you or a relative's connection to a business does not rise to the financial thresholds contained in ORS 244.020(3)(4), the City would like to know of any relationship to a business that could benefit financially from the outcome of the matter to be considered by this advisory body.

Do you or a relative have connections that could result in a financial benefit of more than \$500 annually? Please explain.

Yes       No

3. Do you or does any relative of yours have a professional affiliation with the City of Portland, either as a staff member or through a contract?

Name	Relationship	Bureau/Department	Position	Contract

Your signature below affirms that all information contained in this form is true to the best of your knowledge. If at any time following the submission of this form you become aware of any actual or potential conflicts of interest or if the information provided becomes inaccurate or incomplete, promptly notify the staff contact for the City advisory body. Misstatement of fact or misrepresentation of information may result in your application being disqualified, or future dismissal from the advisory body.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

## **Definitions**

### **1. Business:**

Oregon state ethics law (ORS 244.020(3)4) defines “business with which the person is associated” as:

- When, during the preceding calendar year, an appointee or relative has held a position as director, officer, owner, employee or agent of a private business or a closely held corporation in which the appointee or relative held or currently holds stock, stock options, equity interest or debt instrument over \$1,000.
- When, during the preceding calendar year, appointee or relative has owned or currently owns stock, equity interest, stock options or debt instruments of \$100,000 or more in a publicly held corporation.
- When the appointee or relative is a director or officer of a publicly held corporation.
- When an appointee is required by ORS 244.050(5) to file an Annual Verified Statement of Economic Interest form and the business is listed as a source of household income.

### **2. Relative:**

ORS 244.020(15)2 defines “relative” to include following:

- Spouse (including domestic partners)
- Children
- Children of the spouse
- Siblings
- Siblings of the spouse
- Spouse of siblings
- Spouse of siblings of the spouse
- Parents
- Parents of the spouse
- Person for whom the public official or candidate has a legal support obligation
- Person benefiting from a public official when benefits are from the public official’s public employment
- Person who provides benefits to a public official or candidate when benefits are from the person’s employment

For purposes of “relatives” defined by the last two bulleted items, examples of benefits may include, but not be limited to, elements of an official compensation package including benefits such as insurance, tuition or retirement allotments.

## **Chapter 1.03 Code of Ethics**

(Chapter added by Ordinance No. 167619, effective May 4, 1994.)

### **1.03.010 Definitions.**

- A. **City official** means any elected official, employee, appointee to a board or commission, or citizen volunteer authorized to act on behalf of the City of Portland, Oregon.
- B. **Ethics** means positive principles of conduct. Some ethical requirements are enforced by federal, state, or local law. Others rely on training, or on individuals' desire to do the right thing. The provisions of this Chapter which are not elsewhere enforced by law shall be considered advisory only.

### **1.03.020 Trust**

The purpose of City government is to serve the public. City officials treat their office as a public trust.

- A. The City's powers and resources are used for the benefit of the public rather than any official's personal benefit.
- B. City officials ensure public respect by avoiding even the appearance of impropriety.
- C. Policymakers place long-term benefit to the public as a whole above all other considerations, including important individuals and special interests. However, the public interest includes protecting the rights of under-represented minorities.
- D. Administrators implement policies in good faith as equitably and economically as possible, regardless of their personal views.
- E. Whistle-blowing is appropriate on unlawful or improper actions.
- F. Citizens have a fair and equal opportunity to express their views to City officials.
- G. City officials do not give the appearance of impropriety or personal gain by accepting personal gifts.
- H. City officials devote City resources, including paid time, working supplies and capital assets, to benefit the public.
- I. Political campaigns are not conducted on City time or property.

### **1.03.030 Objectivity**

City officials' decisions are based on the merits of the issues. Judgment is independent and objective.

- A. City officials avoid financial conflict of interest and do not accept benefits from people requesting to affect decisions.
- B. If an individual official's financial or personal interests will be specifically affected by a decision, the official is to withdraw from participating in the decision.
- C. City officials avoid bias or favoritism, and respect cultural differences as part of decision-making.
- D. Intervention on behalf of constituents or friends is limited to assuring fairness of procedures, clarifying policies or improving service for citizens.

#### **1.03.040 Accountability**

Open government allows citizens to make informed judgments and to hold officials accountable.

- A. City officials exercise their authority with open meetings and public records.
- B. Officials who delegate responsibilities also follow up to make sure the work is carried out efficiently and ethically.
- C. Campaigns for election should allow the voters to make an informed choice on appropriate criteria.
- D. Each City employee is encouraged to improve City systems by identifying problems and proposing improvements.
- E. City government systems are self-monitoring, with procedures in place to promote appropriate actions.

#### **1.03.050 Leadership**

- A. City officials obey all laws and regulations.
- B. City officials do not exploit loopholes.
- C. Leadership facilitates, rather than blocks, open discussion.
- D. Officials avoid discreditable personal conduct and are personally honest.
- E. All City bureaus and work teams are encouraged to develop detailed ethical standards, training, and enforcement.
- F. The City Auditor will publish a pamphlet containing explanations and examples of ethical principles.

## **CONFIDENTIAL DEMOGRAPHIC INFORMATION FORM FOR CITY ADVISORY BODIES**

**FOR APPLICANT:** Completion of this section is not required and is therefore completely voluntary. The City is committed to diversity, inclusion, and equity and uses provided demographic information to help ensure that advisory body appointments represent a broad cross-section of community. This information will not be used during the recruitment or selection process. State and federal law prohibit use of this information to discriminate against you. The City will treat this information as confidential to the fullest extent allowed by law.

**City Staff Liaison:** Please separate submitted confidential demographic information from the rest of the application form. Provided demographic information is confidential and cannot be used to inform or influence selection decisions. This data may be used in aggregate form to report on overall volunteer representation and to improve the City's engagement with and services to diverse populations.

**What is your age?**

- Under 18     18-24     25-34     35-44     45-54  
 55-64     65-75     over 75     Prefer not to disclose

**Which of the following describes your racial or ethnic identity? Please check all that apply.**

- American Indian/Alaska Native     Hispanic/Latinx  
 Asian     Native Hawaiian or Pacific Islander  
 African American or Black     White  
 Middle Eastern/Northern African     Prefer not to disclose  
 Unknown  
 Other:

**What is/are language(s) spoken at your home?**

**Do you have any American Indian/Alaska Native tribal affiliation?**

- Yes     No

**If yes, please list your affiliation?**

**Are you enrolled?**

- Yes     No

**Are you a descendent?**

- Yes     No

**Do you live with a disability or identify as a disabled person?**

- Yes     No

**If yes, please describe the nature of your disability.** Please check all that apply

- Mobility       Visual       Hearing       Cognitive  
 Mental Health       Invisible       Prefer not to disclose  
 Physical – affects organ function (*e.g.*, heart or lung disease, diabetes)  
 Other:

**What is your gender?** Please check all that apply.

- Female       Male       Gender non-conforming  
 Transgender       Cisgender       Genderqueer  
 Two spirit       Prefer not to disclose  
 Other:

**What is your sexual orientation?** Please check all that apply.

- Straight       Lesbian       Gay  
 Bisexual       Queer       Prefer not to disclose  
 Other:

**What is your highest education level attained?**

- No schooling complete       Some college  
 Nursery or Preschool through grade 12       Associate's degree  
 High school graduate or equivalent       Bachelor's degree  
 Prefer not to disclose       Graduate degree

**What is your field of expertise?** Please check all that apply.

- Architecture       Education       Business       Government  
 Health       Sales       Planning       Environment  
 Prefer not to disclose  
 Other:

**What is your employment status?**

- |   |  |                                  |
|---|--|----------------------------------|
| <input type="checkbox"/> Employed, full-time    | <input type="checkbox"/> Employed, on call | <input type="checkbox"/> Retired |
| <input type="checkbox"/> Employed, part-time    | <input type="checkbox"/> Not employed      | <input type="checkbox"/> Disable |
| <input type="checkbox"/> Prefer not to disclose |  |                                  |

**What is your total household income?**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Under \$30,000        | <input type="checkbox"/> \$30,000 to \$59,999 | <input type="checkbox"/> \$60,000 to \$89,999   |
| <input type="checkbox"/> \$90,000 to \$199,999 | <input type="checkbox"/> Over \$200,000       | <input type="checkbox"/> Prefer not to disclose |

**What is your geographic area of residency?**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Southwest        | <input type="checkbox"/> Southeast              | <input type="checkbox"/> Northwest                  |
| <input type="checkbox"/> Northeast        | <input type="checkbox"/> North                  | <input type="checkbox"/> Outer East (East of I-205) |
| <input type="checkbox"/> Outside Portland | <input type="checkbox"/> Prefer not to disclose |   |
| <input type="checkbox"/> Other:           |   |   |

**Which best describes your current housing?** Please check all that apply.

- |                                    |                                    |   |
|------------------------------------|------------------------------------|---|
| <input type="checkbox"/> Rent      | <input type="checkbox"/> Own       | <input type="checkbox"/> Duplex                 |
| <input type="checkbox"/> Apartment | <input type="checkbox"/> House     | <input type="checkbox"/> Mobile home            |
| <input type="checkbox"/> Condo     | <input type="checkbox"/> Shelter   | <input type="checkbox"/> Prefer not to disclose |
| <input type="checkbox"/> Van, boat | <input type="checkbox"/> Houseless |   |
| <input type="checkbox"/> Other:    |                                    |   |