

# CENTRAL CITY IN MOTION WORKING GROUP

# APPLICATION FORM 2021

Thank you for your interest in serving as a member of the Portland Bureau of Transportation (PBOT) Central City in Motion Working Group (CCIM Working Group)!

This form is designed to collect information from individuals who are interested in serving on the CCIM Working Group. It includes the following required sections:

**General Information**

**Application Questions**

**Conflict of Interest Disclosure Form**.

Information provided in the above sections is public information. At the end of the form, there is a link to a voluntary and a confidential section entitled **Confidential Demographic Information Form**. Any information provided under the Confidential Demographic Information Form 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 Central City in Motion Working Group, as well as the position description, applicant qualifications and expectations, and selection process at https://www.portland.gov/transportation/ccim-working-group.

To be considered for the position, please be sure to complete the entire application online, [here](https://www.surveymonkey.com/r/CCIMApplication).

If you have questions and/or need assistance in completing this form, please contact the Central City in Motion staff liaison, Briana Orr, at [Briana.orr@portlandoregon.gov](mailto:Briana.orr@portlandoregon.gov) or 503-823-7566.

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 APPLICANT INFORMATION FORM

Applicant name:

Email:

Phone:

**Currently, do you work, play, go to school, and/or worship in the City of Portland?** Please mark all that apply so we can know the variety of ways you are involved in Portland. Some of the boxes you check will be related to selection criteria.

 Live (reside and sleep)

 Work (or do business, includes non-profit/volunteerism, and family care taking)

 Play (recreation, visiting establishments in Portland)

 Worship (engage in spiritual activities of all types such as churches, or religious organization affiliations and practices)

 Go to school (including study, take classes, research, broadly interpreted)

**Are there barriers to your participation that we could help alleviate? Please note, some committees may not yet offer the options below. This information is collected so that we can better plan for community members who need participation supports.**

|  |
| --- |
| I do not need participation supports |
| Food (in-person meetings) |
| Bus pass/parking voucher (in-person meetings) |
| On-site childcare |
| Stipend/nominal pay (not available yet, but are gathering interest to be able to offer this in the future) |
| I prefer not to answer  My need is not listed/I would like to describe the participation support I need (please describe, try to be specific if possible so we can best assist you and plan budgets). |

**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 Briana Orr at [Briana.orr@portlandoregon.gov](mailto:Briana.orr@portlandoregon.gov) or 503-713-1414. You may also contact the Office of Community & Civic Life at (503) 823-4519, [AdvisoryBodies@PortlandOregon.gov.](mailto:AdvisoryBodies@PortlandOregon.gov) or use City TTY 503-823- 6868, or Oregon Relay Service: 711.

# APPLICATION QUESTIONS

This document for drafting purposes only. Enter answers into [online application form here](https://www.surveymonkey.com/r/CCIMApplication). Please do not email your responses.

**1. Please describe your connection to the Central City, (map below), and why you would like to contribute to the** [**Working Group’s purpose**](https://www.portland.gov/sites/default/files/2020-07/central-city-bylaws_signed-director-warner-2.24.20.pdf)**. (Please limit your response to 500 words.)**

Map

Description automatically generated

#### **2. Please 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. (Please limit your response to 250 words.)**

#### **3**. **If selected and appointed to serve, what would you hope to accomplish during your service? (Please limit your response to 250 words.)**

#### The City of Portland seeks to build **diverse representation** on advisory bodies in terms of race, ethnicity, disability, gender identity, sexual orientation, national origin, age, religion, and geographic identification, as well as advocacy experience, community involvement, volunteerism, occupation, and education.

#### **4. Please describe your experience working in community, diverse groups, or public bodies, and provide examples in which you contributed to productive group processes and collective work in a collaborative environment. If applicable, please include specific examples in working in culturally specific, multicultural, and/or multilingual setting. (Please limit your response to 250 words.)**

PBOT is committed to advancing equity and addressing structural racism in every element of the work that we do. This means ensuring that communities of color and people with limited mobility, previously excluded from the decision-making process, have a prominent seat at the table and are centered in policy, investments, services, and programs.

#### **5. Please describe how your personal, professional, educational, and/or lived experience will help to inform the perspective you bring advancing equitable outcomes as part of this project. (Please limit your response to 250 words.)**

#### **6.** **Please describe your ability to listen and consider other perspectives which may be different from your own.** **(Please limit your response to 250 words.)**

By signing or typing my name below, I affirm 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.

**NAME DATE**

# 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,](#_bookmark3) 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*](#_bookmark0) page and answer the following questions

1. Are you or is a [relative](#_bookmark2) associated with a [business,](#_bookmark1) as defined by ORS 244.020(3)(4), that is related to the subject matter to be considered by this advisory body?

 Yes  No

If yes, please explain.

1. Even if you or [a relative’s](#_bookmark2) connection to [a business](#_bookmark1) 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?

 Yes  No

If yes, please explain.

1. 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? Please list. If none, please list "N/A" in top row.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Relationship** | **Bureau/Department** | **Position** | **Contract** |
|  |  |  |  |  |
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|  |  |  |  |  |

By signing and/or printing my name below, I affirm that all information contained in this form is true to the best of my knowledge. If at any time following the submission of this form I become aware of any actual or potential conflicts of interest or if the information provided becomes inaccurate or incomplete, I will promptly notify the staff contact for the City advisory body. Misstatement of fact or misrepresentation of information may result in my application being disqualified, or future dismissal from the advisory body.

Signature Date

Print Name

# DEFINITIONS

## 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.

## 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**

1. **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.
2. **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.

1. The City’s powers and resources are used for the benefit of the public rather than any official’s personal benefit.
2. City officials ensure public respect by avoiding even the appearance of impropriety.
3. 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.
4. Administrators implement policies in good faith as equitably and economically as possible, regardless of their personal views.
5. Whistle-blowing is appropriate on unlawful or improper actions.
6. Citizens have a fair and equal opportunity to express their views to City officials.
7. City officials do not give the appearance of impropriety or personal gain by accepting personal gifts.
8. City officials devote City resources, including paid time, working supplies and capital assets, to benefit the public.
9. 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.

1. City officials avoid financial conflict of interest and do not accept benefits from people requesting to affect decisions.
2. 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.
3. City officials avoid bias or favoritism, and respect cultural differences as part of decision-making.
4. 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.

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

1.03.050 **Leadership**

1. City officials obey all laws and regulations.
2. City officials do not exploit loopholes.
3. Leadership facilitates, rather than blocks, open discussion.
4. Officials avoid discreditable personal conduct and are personally honest.
5. All City bureaus and work teams are encouraged to develop detailed ethical standards, training, and enforcement.
6. The City Auditor will publish a pamphlet containing explanations and examples of ethical principles.



# CONFIDENTIAL DEMOGRAPHIC INFORMATION 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.

To ensure confidentiality, please send your application and confidential demographic information to [AdvisoryBodies@PortlandOregon.gov.](mailto:AdvisoryBodies@PortlandOregon.gov) Or mail to:

Advisory Bodies Program City Hall

1221 SW 4th Avenue, Room 110

Portland, OR 97204

## For City Staff Liaison:

Please forward all applications including **Confidential Demographic Information** and send it to [AdvisoryBodies@PortlandOregon.gov.](mailto:AdvisoryBodies@PortlandOregon.gov) Do not store confidential demographic information. Delete or shred confidential demographic information. Demographic information 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.

# CONFIDENTIAL DEMOGRAPHIC INFORMATION FORM

## What is your age?



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

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

|  |  |
| --- | --- |
| American Indian or Alaska Native | Hispanic or Latinx |
| Asian | Native Hawaiian or Pacific Islander |
| African American or Black | White |
| Middle Eastern or Northern African | My race is unknown to me |
| Prefer not to disclose |  |
| Prefer to describe: |  |

**What is/are language(s) spoken at your home?** If multiple, list in order of preference.

## Do you have any American Indian or Alaska Native tribal affiliation?

Yes No

If yes, please list your affiliation?

Are you enrolled?

Yes No

Are you a descendant?

Yes No

N/A

N/A

## 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.

|  |  |
| --- | --- |
| Female | Male |
| Gender expansive (*e.g.,* non-binary, agender, gender fluid) | |
| Transfeminine | Transmasculine |
| Two Spirit | Not sure or undecided |
| Prefer not to disclose |  |
| Prefer to describe: |  |

|  |  |  |
| --- | --- | --- |
| Queer | Gay | Lesbian |
| Bisexual | Pansexual | Heterosexual |
| Asexual | Not sure or undecided | |
| Prefer not to disclose | | |
| Prefer to describe: |  |  |

|  |
| --- |
| Mobility (*e.g.*, walking, climbing stairs) |
| Visual (*e.g*., blind, low vision) |
| Deaf or hard-of-hearing |
| Cognitive (*e.g.,* traumatic brain injury, learning disabilities) |
| Mental health (*e.g.*, anxiety, PTSD) |
| Intellectual or developmental (*e.g.*, Down syndrome, fragile X syndrome) |
| Invisible (*e.g.*, diabetes, HIV, cancer) |
| Prefer not to disclose |
| Prefer to describe: |

**Wh****at is your gender?** Please check all that apply.

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

## 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 | |  |  |
| Prefer to describe: | |  |  |

**What is your employment status?**

|  |  |  |
| --- | --- | --- |
| Employed, full-time | Employed, on call | Retired |
| Employed, part-time | Not employed | Disabled |
| Prefer not to disclose |  |  |

**What is your total yearly household income or salary?**



|  |  |  |
| --- | --- | --- |
| Under $30,000 | $60,000 to $89,999 | Over $200,000 |
| $30,000 to $59,999 | $90,000 to $199,999 | Prefer not to disclose |

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



|  |  |  |
| --- | --- | --- |
| Southwest Northeast  Outside of Portland: Prefer to describe: | Southeast | Northwest |
| North | Outer East (East of I-205) |
| Prefer not to disclose | |

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

Rent Apartment Condo Van, boat

Group housing

Own House Shelter Houseless

Prefer not to disclose

Duplex Mobile home

Assisted Living

Prefer to describe: