

**Community Advisory Committee Application**

[**www.*flcic*.org**](http://www.flcic.org)

#### Full Name: Date of Birth: \_\_ \_\_\_\_\_\_

### Address: City: State: Zip:

### Telephone #: (home) (cell)

### Florida County: Email Address:

Profession/Affiliation/Organization (most recent):

**1. What is your preferred format to receive information?**

 [ ] hard copy mailing (large or small print) [ ] email [ ] Braille [ ] Other:

**2. Check all the roles that apply to you.**

[ ] self-advocate [ ] parent of minor w/dd [ ] parent of adult w/dd [ ] agency representative

\*For Questions 3-9, feel free to use another sheet of paper if needed.

**3. Please detail any accommodations you need to fully participate on the Community Advisory Committee**:

    \_\_\_\_\_\_\_\_\_\_\_

    \_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4. Is there any reason why you would have any difficulty attending an in-person full day meeting once per year (usually November) in Tampa?**Yes No

If yes, please share why:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5. Is there any reason why you would have difficulty being present on conference calls/webinars**(3 times a year)\*? Yes No

If yes, please share why:  \_\_\_\_\_

**6. Please share what you believe is the most important work of the FCIC.**

**7. Please describe why you want to serve on the advisory committee.**

**8. List 3 of your strengths as an advocate and how you have advocated for yourself and/or others.**

**9. Please list at least 3 goals that you would like to accomplish on the advisory committee.**

**10. Demographic Profile:**

Gender: 🖵 Male 🖵 Female

Race (check one):

* White refers to people having origins in any of the original peoples of Europe, the Middle East, or North Africa.
* Black or African American refers to people having origins in any of the Black racial groups of Africa.
* American Indian and Alaskan Native refer to people having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
Tribe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Asian refers to people having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent (e.g. Asian Indian).
* Native Hawaiian and Other Pacific Islander refers to people having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
* More than one race includes individuals who identify with two or more racial designations.

Ethnicity (check one):

Hispanic is an ethnic category for people whose origins are in the Spanish-speaking countries of Latin America or who identify with a Spanish-speaking culture. Individuals who are Hispanic may be of any race.

* Hispanic
* Non Hispanic

**Please submit your completed application to Brenda Clark**

**via one of the following choices:**

**Email:** [**bclark7@usf.edu**](file:///%5C%5Cforest.usf.edu%5Cdata%5Cpdrive%5CCBCS%5CCFS%20DARES%20UCEDD%5CCommunity%20Advisory%20Committee%20%28CAC%29%5CCAC%202017%5CNew%20Recruitment%20Applications%202017%5Cbclark7%40usf.edu) **Fax:** (813) 974-6115

**MAIL:** MHC 2113A, 13301 Bruce B. Downs Blvd, Tampa, FL 33612

**QUESTIONS? Call Toll-free:** (866) 818-4797 or (813) 974-2581