

**SHASTA REGION
SOCIAL SERVICES TRANSPORTATION ADVISORY COUNCIL (SSTAC)
APPLICATION FOR APPOINTMENT**

The Shasta Regional Transportation Agency (SRTA) is seeking members of the public to serve on its SSTAC for a three-year term. The SSTAC advises SRTA on the transportation needs of transit dependent and transit disadvantaged persons, and other major transportation issues such as transit coordination. We encourage you to apply. If not selected as a voting member, alternates and members of the public may still participate in SSTAC meetings. SSTAC meetings are scheduled for mid-March and mid-September of each year.

Please read the SSTAC Fact Sheet before filling out this application. If you have any additional comments or information, please provide it on a separate document, attach it to the application, and return it to the physical or email address listed at the bottom of this application form.

NAME: _____

ADDRESS: _____

TELEPHONE: HOME (if applicable): _____ **BUSINESS:** _____

EMAIL ADDRESS: _____

WHICH SSTAC VOTING MEMBER CATEGORIES DO YOU QUALIFY FOR (SEE SSTAC FACT SHEET):		THE SSTAC MEETS TWICE PER YEAR. WILL YOU HAVE DIFFICULTY ATTENDING THE MEETINGS THIS TERM?
<input type="checkbox"/> Category 1	<input type="checkbox"/> Category 5	<input type="checkbox"/> YES
<input type="checkbox"/> Category 2	<input type="checkbox"/> Category 6	
<input type="checkbox"/> Category 3	<input type="checkbox"/> Category 7	<input type="checkbox"/> NO
<input type="checkbox"/> Category 4		

WHAT DO YOU HOPE TO ACHIEVE ON THE COUNCIL:

BACKGROUND AND QUALIFICATIONS:

Describe your personal experience with transit as a passenger or working for an organization (how many times or how many months/years you have ridden transit, which transit services you have used in Shasta and elsewhere, what percent of your job and *how* is it devoted to transit, etc.). Attach additional pages, if necessary. Transit ridership is not a requirement of appointment.

SSTAC MEMBER DIVERSITY:

Pursuant to CA PUC § 99238, Title VI of the Civil Rights Act of 1964, 42 U.S.C. § 2000d et seq, and FTA C 4702.1B, SRTA strives to attain geographic and minority representation among SSTAC members.

A. Please mark one box in the blue section and one box in the red section.

Race and Ethnicity		
<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Other Race/Biracial/Multiracial
<input type="checkbox"/> Not Hispanic or Latino	<input type="checkbox"/> Asian	<input type="checkbox"/> White
<input type="checkbox"/> Elect not to report	<input type="checkbox"/> Black or African American	<input type="checkbox"/> Elect not to report
	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	

B. Geographical area you represent (Area your agency serves; where you work/live; etc.):

CERTIFICATION

I certify that the above information is true and correct and I authorize the verification of the information in the application in the event I am a finalist for the appointment.

Signature

Date

Appointment may be considered at a Shasta Regional Transportation Agency Board of Directors meeting. Information you submit on your application may become a matter of public record.

Return Application to:

Shasta Regional Transportation Agency
SSTAC
1255 East Street, Suite 202
Redding, CA 96001
Phone 530-262-6190, Fax 530-262-6189, Email
ktaguchi@srta.ca.gov

More information regarding the SSTAC and its responsibilities may be found by contacting Kimiko Taguchi at (530) 262-6205 or by email at ktaguchi@srta.ca.gov.

If information is needed in another language, contact (530) 262-6190. Si se necesita información en español, llame (530) 262-6190.