Corpus Christi Regional Transportation Authority RTA Committee on Accessible Transportation Application for Membership		
The RTA Committee on Accessible Transportation is composed of up to ten members and serves in an advisory capacity to the RTA's Board of Directors and staff. The mission of the RTA Committee on Accessible Transportation is to provide guidance and insight to the RTA's Board of Directors through staff on the development and operation of public transportation services which promote the inclusion and integration of persons with disabilities. The application is required and is available in alternate formats upon request. Please complete all the information requested on this application. A resume or any other additional information may be attached but is not required.		
	Applicant In	formation:
Name	:	
Addre		
City:	State:	Zip:
	Phone:	
VVOrK	Phone:	
1	Previous Ex	
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(e.	g. Lions Club, Kiwanis).	erience with any service organizations
2. Ha	• • •	commissions? If yes, please tell us
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Are you affiliated with an organization or agency that provides services for persons with disabilities? Please explain:			
8. Please consider any additional information you would like us to consider. (You must submit a letter of interest, a short resume or bio.)			
9. Tell us briefly why you want to serve on the RCAT committee?			
References:			
1. Reference Name:			
Address:			
City: State: Zip:			
Phone Number:			
2. Reference Name:			
Address:			
City: State: Zip:			
Phone Number:			
Instructions:			
Applications for RCAT membership may be sent in one of two ways: by e-mail, or mail. To send by e-mail, please title your e-mail RCAT Application and send the completed application to Amanda De La Cerda at ADeLaCerda@ccrta.org. To send by mail, please mail to the attention of Amanda De La Cerda at CCRTA, 602 N. Staples, Corpus Christi, TX 78401. Applications will be kept on file for one year from the date submitted. Please contact Amanda De La Cerda at 361-289-2712 if you would like to update your information or have additional questions about the selection review process. Thank you for your interest.			
Applicant Signature: Date:			