

**Notice:** Information provided on this form is voluntary and will be used to review your application for the Disability Advisory Council vacancy. Under Wisconsin's Open Records Law [s. 19.31-19.39, Wis. Stats.], information provided may be made accessible to the public upon request. It will not be used for other purposes.

**Complete this section:**

Name	Home Telephone Number
Street Address	Business Telephone Number
City, State, ZIP	E-Mail Address
Business Address	Fax Number

**Personal Information – Optional:** Information is collected for federal and state reporting purposes.

Female       Male      Birth date: \_\_\_\_\_  
Month-Day-Year

**Heritage:**

African American     Asian/Pacific Islander  
 Hispanic/Latino       American Indian/Alaskan Native  
 White/Other

Do you have a disability? If so, please describe.

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**Complete this section: Use additional sheets if needed to fully report.**

1. Please describe why you would like to be a volunteer on the DNR Disability Advisory Council.
2. What specific experience or skills do you have that will enhance the Disability Advisory Council's ability to advise the Department on programs and services for persons with disabilities?
3. Please list any membership experiences in community, state or national organizations.
4. What suggestions or ideas do you have that would make DNR programs more accessible to persons with disabilities?
5. Are you connected to the Internet and comfortable using it?
6. Are you willing and /or experienced in any of these areas: advocacy, fundraising, public speaking or public relations? Please describe your experience and expertise on any of these areas.
7. Any other comments regarding your interests or abilities.

Check here if you would prefer to discuss your answers orally with the membership committee. You will be called, and an appointment will be set up to speak with you either in person or by telephone (voice or TTY).

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**Return form to:** Anthonette Gilpatrick – LF/6, DNR, PO Box 7921, Madison, WI 53707-7921. Thank you for your interest!

**This form can be provided in an alternate format upon request.** (608) 267-7490 (Voice) or Wisconsin Relay 7-1-1