



Rogue Valley Transportation District

DUE DECEMBER 31, 2023

Statewide Transportation Improvement Fund Advisory Committee (STIF) Application

Applicant Information

Full Name: _____ **Date:** _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ **Email:** _____

Applicant Qualifications

Applicants must reside in Jackson County and be knowledgeable about the public transit needs of residents or employees located within or traveling to or from the RVT Transportation District.

Are you a resident of the District? YES NO If no, do you live in Jackson County? YES NO

Applicants must be a member of or represent one or more of the following categories. Please check all that apply.

- Local Governments, including land use planners
- Non-Profit Entity which provides public transportation services.
- Employers
- Transit User
- Individuals age 65 or older
- Low Income Individuals
- Environmental Advocates
- People with limited English proficiency
- Major Destination for users of Public Transit
- Public Transportation Service Providers
- Neighboring Public Transportation Service Providers
- Public Health, social and Human Service Providers
- Dependent Transit User
- People with Disabilities
- Social Equity Advocates
- Bicycle and Pedestrian Advocates
- Educational Institutions

Please Answer the Following Questions

Why would you like to be a member of the STIF Advisory Committee?

What experiences (professional, volunteer or personal) have you had that would help you become an effective Committee Member?

Please list agencies, groups, or organizations that you belong to or participate in that are related to the activities or responsibilities of the Committee?

What agency/employer do you work for? or Who is your employer?

Who do you represent?

In what capacity and by what authority do you represent them?

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Please consider me for appointment to RVTD's Statewide Transportation Improvement Fund (STIF) Advisory Committee.

Signature: _____ Date: _____

Please remit application to: STIFAC, Rogue Valley Transportation District, 3200 Crater lake Ave, Medford, OR 97504 or email application to egomez@rvtd.org with subject line "STIFAC"