



Governmental Operations Standing Committee

Boards & Commissions
Vacancy Report

Thursday, May 24, 2018

<u>Board Name</u>	<u>Criteria for Appointment</u>	<u>Applicant Name</u>
Sister Cities Commission (13 members) (page 2)	* (1 vacancy)	Marcus Squires (reappointment, page 3)

* Applicants must either reside or work in the city of Richmond.

Sister Cities Commission

Vacancy Chart

as of
July 22, 2018

The commission shall consist of thirteen (13) members, of whom at least one shall be a member of Council. The members shall be appointed by City Council. Members appointed to the commission shall either reside or work in the city of Richmond.

(Assigned to the Governmental Operations Standing Committee)

Member	Patron	Expiration Date	Eligible for Reappoint.	Interested in Reappoint.	Qualification
Marcus Squires	All members of Council	07/09/2018	Yes	Application included	Reside or work in the city

Contact:

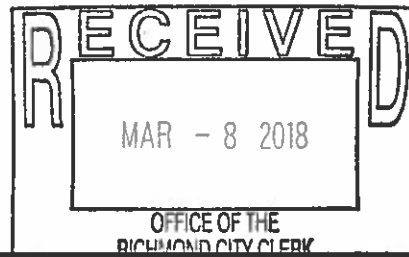
Marcus Squires, Chair
Sister Cities Commission
(804) 617-7585 (h)
richmondsistercities@gmail.com



City of Richmond, Virginia
City Council
Authorities, Boards, Commissions and Task Forces
Reappointment Application

(Please Print or Type)

Name of Authority, Board, Commission or Task Force: <u>Richmond Sister Cities Commission</u>	
Title: Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: <input type="checkbox"/>	
Last Name: <u>Squires</u>	First Name: <u>Marous</u>
Home Street Address: <u>5915 Warwick Rd</u>	Home Telephone:
Home City, Zip Code: <u>Richmond, VA 23805</u>	Home Fax:
Personal E-Mail Address: <u>Squires Ma@mymail.vcu.edu</u>	
Employer: <u>Richmond Public Schools</u>	
Job Title: <u>Paraprofessional</u>	How Long? <u>3 yrs</u>
Business Street Address: <u>900 E. Broad Street</u>	Business Telephone:
Business City, Zip Code:	Business Fax:
Business E-Mail Address:	
Is your place of employment located in the city of Richmond? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Is your place of employment located in the county? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, which county?	
Are you a city resident? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, which City Council district? <u>9</u> Number of years? <u>9</u>	
Do you or your employer have a contract, other than a contract of employment, either with the city of Richmond or with the entity to which you are seeking appointment? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If yes, please provide information on the nature of the contract.	
Signature: <u>Marous Squires</u>	Date: <u>3/8/2018</u>
(By signing, forwarding or otherwise transmitting this form, you certify that all information submitted for consideration is true and accurate to the best of your knowledge.)	



NOTE: This application is a public document.

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