

# Disability Advisory Commission Supplemental Questionnaire

Attach additional sheets if necessary

1. Have you ever attended a meeting of the Commission? Yes  No
2. The DAC meetings occur as needed on the second Monday of the month from 2:30 pm to 5:30pm. Would you be available to attend meetings at the scheduled time?  
Yes  No

3. Please describe your experience in serving on a Commission or Board.

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4. What is your understanding of the purpose of the Disability Advisory Commission?

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5. Considering your experience and activities in business, labor, professional, social, or other organizations, indicate the experience or activity which qualify you for an appointment to this commission.

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6. What has been your experience in problem solving community issues relative to the disabled community?

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**Note: the application and this supplemental questionnaire are the only two forms required to apply for membership to the Disability Advisory Commission**