

# ILLINOIS ROUTE 3 CONNECTOR PROJECT COMMUNITY ADVISORY GROUP Membership Application



Fold on Dashed Lines, Tape, Stamp, and Mail

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_



**Illinois Department of Transportation**  
Division of Highways  
District 8  
1102 Eastport Plaza Drive  
Collinsville, IL 62234-6198

# COMMUNITY ADVISORY GROUP MEMBERSHIP APPLICATION



Illinois Department of Transportation

PLEASE PRINT

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

If selected, I would be representing the following (select all that apply):

- |   |   |
|---|---|
| <input type="checkbox"/> Area Resident              | <input type="checkbox"/> Cultural Group                 |
| <input type="checkbox"/> Business Owner             | <input type="checkbox"/> Church                         |
| <input type="checkbox"/> Agricultural Interest      | <input type="checkbox"/> School                         |
| <input type="checkbox"/> Local or County Government | <input type="checkbox"/> Other Interest: Please Specify |
| <input type="checkbox"/> Trucking Company           | _____   |

Please describe your main reason for seeking membership on the Community Advisory Group (CAG) and the number of hours per month you feel you could devote to CAG activities:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I am submitting this request to become a member of the Community Advisory Group (CAG) for IDOT's Illinois Route 3 Connector Project. I understand that CAG membership requires a commitment to: 1) provide input to IDOT in identifying issues important to the community, and providing feedback on alternatives; 2) to attend all CAG meetings (or send a replacement); and 3) to participate in CAG group activities. I understand that these commitments extend until completion of the project. I understand that IDOT is operating under a schedule for this project and that CAG meetings will be scheduled to coincide with other project activities. If I cannot fulfill my commitment to the CAG, then I understand IDOT may choose to replace me on the CAG in order for the CAG's work to proceed in a timely manner. I understand that in order to function effectively, the CAG membership must, to the extent practical, represent a wide variety of interests in the community and be limited to the fewest members who represent those interests. I understand, therefore, that my submittal of this request form does not guarantee membership on the CAG.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Please place this completed form in the "Comments" box at the meeting today or, fold on the dotted lines, staple, affix postage and mail. To be considered for membership, this form must be received on or before April 22, 2014.**