



Metro Regional Waste Advisory Committee

2021 Nomination form for local government positions

Deadline to submit nomination is June 30, 2021

Metro's Regional Waste Advisory Committee helps guide implementation of the region's [2030 Regional Waste Plan](#), which addresses:

- a \$280 million per year garbage and recycling system that serves 1.5 million residents and businesses in greater Portland (Clackamas, Washington and Multnomah counties)
- the environmental and health impacts of the products our region makes, uses and discards
- inequities in system services, impacts and benefits experienced by communities of color and other historically marginalized groups

The Committee will:

- provide input on policies and administrative actions that the Metro Council or Chief Operating Officer will consider in implementing actions of the 2030 Regional Waste Plan
- provide input to staff on development of policies, programs and projects to implement actions in the Plan
- review and provide input on Metro and local governments' effectiveness in implementing the Plan

Five positions on the 13-member committee are allocated to local government representatives, with the balance consisting of four community members, one environmental or health advocate, one solid waste industry representative, one staff person from the Oregon Dept. of Environmental Quality and a Metro manager as chair. The committee will meet for two hours every one to two months, with one to two hours of preparation time required per meeting.

Please provide the information requested on the following pages.

Metro Regional Waste Advisory Committee

2021 NOMINATION FOR LOCAL GOVERNMENT POSITIONS



Metro

600 NE Grand Ave.
Portland, OR 97232

Nominee's Name: Lindsay Marshall

Email address: lmarshall@tualatin.gov

Phone: 503-691-3093

Mailing address: 18880 SW Martinazzi Ave

Jurisdiction name: City of Tualatin

Nominator (City manager/County administrator or Mayor/Chair of County Commission)

Name: Sherilyn Lombos

Signature and date: 07/13/2021

Description of nominee's local government job responsibilities:

Management of the City's solid waste/recycling and emergency management programs, including outreach and education.

Metro Regional Waste Advisory Committee

2021 NOMINATION FOR LOCAL GOVERNMENT POSITIONS



Metro

600 NE Grand Ave.
Portland, OR 97232

(Optional) Description of nominee's relevant general experience, skills and knowledge not provided under "job responsibilities" above.

Interest and experience in sustainability work, especially as they relate to social determinants of health and safety.

Nomination submission

By June 30, 2021, please email this completed form to
RegionalWasteAdvisoryCommittee@oregonmetro.gov or mail it to:

Laura van der Veer
Metro – Waste Prevention & Environmental Services
600 NE Grand Avenue
Portland, OR 97232

Please note that information provided in this document is public information.

Metro makes a commitment to provide reasonable accommodation for any disability that may interfere with a person's ability to actively participate in this nomination process. Call (503) 797-1890 with such requests or (503) 797-1804 TDD. Please call (503) 797-1890 if you would like to receive the nomination form translated into a different language.

Metro Regional Waste Advisory Committee

2021 NOMINATION FOR LOCAL GOVERNMENT POSITIONS



Metro

600 NE Grand Ave.
Portland, OR 97232

Optional information

Metro asks that you voluntarily provide the following information for the nominee. We will use this information to help improve public engagement and for statistical purposes, such as tracking the diversity of board, commission, or advisory committee member selections. By providing this information, you will help us ensure that selections represent a broad cross-section of the community.

You are under no obligation to provide this information. State and federal law prohibit the use of this information to discriminate against you. Metro will treat this information as confidential to the fullest extent allowed by law.

Residence Location

In which county do you live?

- ☐ Multnomah
- ☐ Washington
- ☐ Clackamas
- ☐ Other (Please describe) _____

Age

Which of the following ranges includes your age?

- ☐ Under 18
- ☐ 18 to 24
- ☐ 25 to 34
- ☐ 35 to 44
- ☐ 45 to 54
- ☐ 55 to 64
- ☐ 65 to 74
- ☐ 75 and older
- ☐ Prefer not to answer

Race/Ethnicity

Within the broad categories below, where would you place your racial or ethnic identity? (Select all that apply)

- ☐ Native American, American Indian or Alaska Native
- ☐ Asian or Asian American
- ☐ Black or African American
- ☐ Hispanic or Latino/a/x
- ☐ Native Hawaiian or other Pacific Islander
- ☐ White
- ☐ An ethnicity not included above (please specify) _____
- ☐ Prefer not to answer

Metro Regional Waste Advisory Committee

2021 NOMINATION FOR LOCAL GOVERNMENT POSITIONS



Metro

600 NE Grand Ave.
Portland, OR 97232

Gender

How do you identify your gender? (Select all that apply)

- ☐ Man
- ☐ Woman
- ☐ Transgender
- ☐ Non-binary, genderqueer or third gender
- ☐ A gender not listed above (please describe) _____
- ☐ Prefer not to answer

Income

Which of the following best represents the annual income of your household before taxes?

- ☐ Less than \$10,000
- ☐ \$10,000 to \$19,999
- ☐ \$20,000 to \$29,999
- ☐ \$30,000 to \$39,999
- ☐ \$40,000 to \$49,999
- ☐ \$50,000 to \$74,999
- ☐ \$75,000 to \$99,999
- ☐ \$100,000 to \$149,999
- ☐ \$150,000 or more
- ☐ Don't know / Prefer not to answer

Disability

Do you live with a disability? (Select all that apply)

- ☐ Hearing difficulty (deaf or having serious difficulty hearing)
- ☐ Vision difficulty (blind or having serious difficulty seeing, even when wearing glasses)
- ☐ Cognitive difficulty (because of a physical, mental or emotional problem, having difficulty remembering, concentrating or making decisions)
- ☐ Ambulatory difficulty (unable or having serious difficulty walking or climbing stairs)
- ☐ Self-care difficulty (unable or having difficulty bathing or dressing)
- ☐ Independent living difficulty (because of a physical, mental or emotional problem, unable or having difficulty doing errands alone)
- ☐ A disability not listed above (please describe) _____
- ☐ No disability
- ☐ Prefer not to answer