From: noreply@civicplus.com
To: Kay Draughn; Kat Wright
Subject: Online Form Submittal: Burke County Appointment Application for Boards and Committees
Date: Wednesday, January 15, 2025 12:27:50 PM

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Burke County Appointment Application for Boards and Committees

First Name	Jessi
Last Name	Stout
Address	109 Riverside Court
City	Morganton
State	NC
Zip Code	28655
Home Phone Number	7042800430
Business Phone Number	*Field not completed.*
Cell Phone Number	7042800430
Email Address	jessi_stout@tablerockrx.com
	(Section Break)
Occupation	Pharmacist
Retired From	*Field not completed.*
How did you hear about this opportunity?	Board / Committee Member
Are you currently serving on a county board or committee?	Yes
If so, please identify the board or committee.	Public Health Advisory Board

Please indicate any community interests and activities that you are involved in.	Patient Health Access Coalition - Board Member North Carolina Association of Pharmacists (NCAP) - Legislative Board Chair UNC Eshelman School of Pharmacy Alumni Association Advisory Council (PAC) UNC Health Blue Ridge Quality and Patient Safety Committee North Carolina Association of Pharmacists (NCAP) Independent Pharmacy Network (IPN) leadership committee & member Blue Ridge Community Action Health Advisory Committee Burke County Public Health Advisory Board Community Pharmacy Enhanced Services Network, member (November 2017-present), luminary (October 2021-present), NC board member (November 2022-present), National Technology Committee Member (January 2023-present), USA board member (October 2024-present)
Do you reside in the extraterritorial jurisdiction of a municipality, which is generally a 1 to 3-mile perimeter outside the city limits?	No

(Section Break)

List in order of preference the board and/or committee(s) on which you would like to serve.

First Choice	Opioid Advisory Board
Second Choice	*Field not completed.*
Third Choice	*Field not completed.*

(Section Break)

Most board or committee seats have no special requirement other than being a citizen of Burke County. Do you have special criteria that you would like to be considered for this appointment?	*Field not completed.*
Describe why you are interested in serving on	Help address the opioid epidemic in Burke County

a board or committee. What goals and objectives do you have?	
Are you willing to attend board or committee meetings on a regular basis and comply with Article IV, Section 2-92 - Attendance, of the Burke County Code of Ordinances?	Yes
Please disclose any business or personal relationships that may be considered a conflict of interest if selected to serve on a board or committee.	*Field not completed.*
Optional Remarks	*Field not completed.*
Optional - Click here to upload supporting documentation that you wish to be reviewed alongside your application.	*Field not completed.*

Burke County is committed to providing an inclusive and welcoming environment for everyone and does not and shall not discriminate on the basis of race, color, religion or creed, gender, gender expression, age, national origin or ancestry, disability, marital status, sexual orientation, or military status, in any of its activities or operations.

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