

Community Planning Group Recognition

Member Composition Form - Worksheet

Planning Group Name: _____

Please provide the member totals for each demographic category in your group (To be completed by the Group's Point-of-Contact and attached to the online application):

RACE/ETHNICITY

___ American Indian

___ Asian

___ Black

___ Hispanic

___ Pacific Islander

___ White

___ Two or more races

___ Other: _____

HOUSEHOLD INCOME

___ Less than \$15,000

___ \$15,000 to \$29,999

___ \$30,000 to \$44,999

___ \$45,000 to \$59,999

___ \$60,000 to \$74,999

___ \$75,000 to \$99,999

___ \$100,000 to \$124,999

___ \$125,000 to \$149,999

___ \$150,000 to \$199,999

___ \$200,000 or more

COMMUNITY AFFILIATION

___ Homeowner

___ Property Owner

___ Renter

___ Local Business Owner or Operator

___ Youth Representative (Age Under 25)

___ Other : _____

AGE

___ Under 25

___ 25 to 29

___ 30 to 39

___ 40 to 49

___ 50 to 59

___ 60 to 69

___ 70 to 79

___ 80 +