City of Northampton
Application for Appointment to
Boards, Committees and Commissions

Name: _____

Address: _____

Email: _____ **Home Phone:** _____

Cell: _____ **Occupation:** _____

Northampton Resident? Yes ☐ **No** ☐ **Years lived in Northampton:** _____

Please indicate the Committee(s) you have interest serving on: ***(Appointment subject to vacancies)***

Agricultural Commission	☐	**Housing Authority - Board of Commissioners**	☐
Almoners, Board of	☐	**Housing Partnership**	☐
Arts Council	☐	**Human Rights Commission**	☐
Assessors, Board of	☐	**License Commission**	☐
Central Business Architecture Committee	☐	**Parks & Recreation Commission**	☐
Community Preservation Committee	☐	**Planning Board**	☐
Conservation Commission	☐	**Registrars, Board of**	☐
Council on Aging	☐	**Transportation & Parking Commission**	☐
Disability Commission	☐	**Trust Fund Committee**	☐
Energy & Sustainability Commission	☐	**Urban Forestry Commission**	☐
Health, Board of	☐	**Youth Commission**	☐
Historical Commission	☐	**Zoning Board of Appeals**	☐

What skills and experience will you bring to this committee or board assignment?
(attach additional sheet or resume if necessary)

_____

_____

_____

_____

Are you currently serving or have you served on any city committee: ☐ **No** ☐ **Yes***

*(*If yes, please state the committee or board)* _____

Required: Please read the following, by signing below you state that you understand and agree:
The filing of this form does not guarantee my appointment. An application is kept on file for two (2) years; after that I must file a new application. Being appointed to a committee, board, or commission means that I am considered a Municipal Employee under MGL Chapter 268A and thereby subject to Conflict of Interest Law MGL Chapter 268A, Financial Disclosure Law MGL Chapter 268B, as well as Open Meeting Law MGL Chapter 39: Section 23B. I understand that I will take the conflict of interest test AFTER being appointed and that I also must be sworn in by the City Clerk. I will contact the appointing authority with any questions about my service. ***IMPORTANT: Once this form is submitted, it becomes a public document, if there is information you do not want open to the public please do not include it on this form!***

SIGNATURE _____ **DATE** _____

Please Return Form To: mayor@northamptonma.gov or
Gina-Louise Sciarra, Mayor, 210 Main Street, Northampton, MA 01060

OPTIONAL INFORMATION

This information will be used for diversity purposes only.
Complete it only if you wish to do so.

Age:

Under 29____ 30-39____ 40-49____ 50-59____ 60-69____ 70 plus____

Sex: M____F____Non-Binary____ Racial/Ethnic Background _____

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