



# 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)*

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

**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](mailto: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** \_\_\_\_\_