BOARDS & COMMISSION APPLICATION

Phone: 401 845-5437 | Email: MayorsOffice@CityofNewport.com | Fax: 401 845-2510

I'm interested in serving the community on the following Board(s) or Commission(s) Academic Integration Advisory Committee Affirmative Action Commission Aquidneck Island Planning Commission ☐ Bicycle & Pedestrian Advisory Commission ☐ Canvassing Authority ☐ Charter Review Commission ☐ Cliff Walk Commission ☐ Energy & Environment Commission ☐ Henderson Home Commission ☐ Historic Cemetery Advisory Commission ☐ Historic District Commission ☐ Historic Monument Commission ☐ Housing Authority of the City of Newport ☐ Board of Tax Appeals Miantonomi Park Commission ☐ Beach Commission ☐ Tree & Open Space Commission ☐ Planning Board ☐ Revenue Review Commission ☐ Trust & Investment Commission ☐ Waterfront Commission ☐ Youth Advisory Commission ☐ Zoning Board of Review Name: Street Address: Mailing Address: Phone: (Home) (Business) (Cell) E-Mail Address: _____ Are you a registered voter in the City of Newport? (Compulsory for all Boards and Commissions) \square Yes \square No Do you reside in the City of Newport year round? Yes No Employer: _____ Length of Employment: _____ If less than two years, previous employer: _____ If yes, please specify name of Board or Commission:____ Have you previously served on a City of Newport Board or Commission: ☐ Yes ☐ No If yes, please specify name of Board or Commission: Have you attended any meetings of the Board(s) or Commission(s) to which you're applying? ☐ Yes ☐ No Work experience related to the Board(s) or Commission(s) being applied for: (If available, please attach a resume to this application) Education background: _____ Provide a brief explanation of your interest in serving on a board or commission: If so desired, please state how your qualifications represent the neighborhood interests, and diversity in ethnicity, race, age, sex, sexual orientation, gender identity, types of abilities, and any other relevant demographic qualities of the City of Newport. Please note your application will be retained for one year. Once submitted, this form, including all attatchments, become public record. Signature of Applicant: Date of Application:

Interview Date: _____ Replacing: ____

Appointed Date: ______ Term Expires: _____ Reappointment Request Date: _____ Reappointed Date: _____

FOR OFFICE USE ONLY:

_____ Unexpired Term: Y N

ETHICS STATEMENT

POLICY STATEMENT:

The City of Newport embraces the core values of honesty, trust, and integrity. In the accomplishment of the City's mission, earning and keeping the public trust is a primary goal. It is the policy of the City to prohibit employees from engaging in activities or practices which conlict with or compromise these values.

| All employees, volunteers, members of boards and commissions, and control of the control of the high standard of dignity and integrity espou | |
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| ,being an applicant for appoi | ntment to a City Board, Committee, or Commission, declar |
| hat said appointment does not, and will not, constitute or create a co | onlict of interest. I further declare that my appointment doe |
| not and will not compromise the core values stated herein, and I pledg | ge to uphold and maintain those values in the performance o |
| my oficial duties with the City. | |
| | |
| freely and voluntarily make this declaration, as a component of the C | ty's application process for appointment |
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| | |
| (Signature) | (Date) |