

To: All Community Board Applicants

Thank you for expressing interest in becoming a Community Board member. Please complete the following application in its entirety and submit it to the address located at the top of the application.

If you would like to submit the application directly to the Borough President, Vito Fossella's office, please go to the following website: StatenIslandUSA.com/cbapplication.html.

Thank you.

Community Board 1, Staten Island



APPLICATION FOR STATEN ISLAND COMMUNITY BOARD MEMBERSHIP
10 Richmond Terrace, Room 100, Staten Island, NY 10301
(718) 816-2000
www.StatenIslandUsa.com



DATE: _____

Office Use Only

CB #: _____

CD #: _____

Appt: _____

1. I am applying for membership on Community Board# _____

To which Board do you seek appointment? (Please Circle)

- a. The Board, which covers the area where you live.
- b. The Board, which covers the area where you work.

2. NAME: (Mr., Mrs., Ms., Dr., Other) _____
(Please print)

3. HOME ADDRESS: * _____
(Street) (Apt. #)

(Borough) (State) (Zip Code)

4. Length of Residence on Staten Island _____ Length of Residence in Community Board _____

5. TELEPHONE: () _____ () _____
(Home) (Business) (Email Address)

6. If you seek appointment to the Board in which you have a business or other interest, describe the nature of that interest:

7. Civic, Fraternal and Community Organization in which you are active. Name organization, dates of membership, offices held, etc.

8. Special skills or interests. Please specify: _____

9. Do you have any professional certificates or licenses? If so, please list: _____

10. Occupation: _____

Present Employer: _____

(Address) _____

Position or Title: _____

11. Are you an employee of the City of New York? Yes _____ No _____
Which division or agency do you serve?

12. Work or school experience for the last 10 years. (List employer and nature of job)

_____	_____
_____	_____
_____	_____
_____	_____

13. Are you employed by or associated with any entity whose contract or program comes before a Community Board for a funding request or review? Yes _____ No _____

14. If the answer to the above question is yes, name the agency, organization or entity.

15. Is any member of your family employed by or associated with any entity whose contract or program comes before a Community Board for a funding request or review?

Yes _____ No _____

16. If the answer to the above question is yes, name the agency, organization or entity.

17. EDUCATION

High School Attended: _____

Year Graduated _____ Diploma _____

College Attended _____ Year Graduated _____

Degree _____

Post Graduate Degree _____

18. If appointed, in which of the following substantive areas of activity would you prefer to be involved?
(1 Being the highest)

- | | | |
|------------------------------|------------------------------|-----------------------------|
| _____ Housing | _____ Planning & Zoning | _____ Education |
| _____ Transportation | _____ Health & Hosp. | _____ Finance & Budget |
| _____ Sanitation | _____ Parks & Recreation | _____ Public Safety |
| _____ Arts & Culture | _____ Senior Citizen Affairs | _____ Environment & Ecology |
| _____ Consumer Affairs | | |
| _____ Other. Please specify: | _____ | |

19. Why do you seek appointment to the Community Board?

20. References:

Name _____

Address _____

Telephone _____

Name _____

Address _____

Telephone _____

Name _____

Address _____

Telephone _____

Signature: _____

Date: _____

Please send the completed, signed application to the following address:

Office of the Staten Island Borough President

10 Richmond Terrace, Room 100

Staten Island, NY 10301

Attn: Director of Community Boards

It is the responsibility of Community Board applicants to notify this office of any changes in residence, business or work location that would affect their membership on the community board.

Please note: You must be a resident of New York City to be eligible for community board membership.

For additional information please contact Marie Carmody-LaFrancesca at the Borough President's Office at mLafrancesca@stateninsula.com or (718) 816-2141.