

Ed Pawlowski, Mayor
City of Allentown
435 Hamilton St, 5th Floor
Allentown, PA 18101-1699
Office 610.437.7546
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Ed.Pawlowski@allentownpa.gov

TO:

Michael Hanlon

City Clerk

FROM:

Ed Pawlowski

Mayor

DATE:

August 11, 2017

SUBJECT:

Authorities, Boards, Commissions Appointments

Mayor Pawlowski has approved the following appointment for City Council's consideration.

Name

Authority/Board/Commission

Term to Expire

Rosalee Thomas

Nuisance Abatement Board of

Appeals

I am attaching Ms. Thomas' application for your review.

EP/mv

Attachments

| REQUEST FOR APPOINTMENT DATE 7/20/17 |
|--|
| AUTHORITY, BOARD OR COMMISSION YOU ARE REQUESTING APPOINTMENT TO: |
| NAME: ROSALEE THOMAS |
| HOME ADDRESS: 2829 W LIVINGSTON ST ALLENTOWN PA 18104 |
| BUSINESS ADDRESS: 209 W UNION ST ALLENTOWN PA 18102 |
| TELEPHONE NO. (RESIDENCE) 610-905-1435 BUSINESS 610-433-4500 |
| EMAIL: ROSALEETHNS@YAHOO.COM |
| PRESENTLY EMPLOYED BY: SELF EMPLOYED |
| JOB TITLE: CO-OWNER PARKWAY CARIBBEAN EMPLOYMENT (Prior): |
| EDUCATION: HIGH SCHOOL GRADUATE: COLLEGE OR UNIVERSITY GRADUATE DEGREE/FIELD OF STUDY HUMAN RESOURCE MANAGEMEN |
| CURRENT MEMBERSHIP IN ORGANIZATIONS AND OFFICES: PRESIDENT - JAMAICA CULTURAL ORGANIZATION (JCO) |
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| PAST ORGANIZATIONAL MEMBERSHIP AND OFFICES HELD: N/A | |
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| | |
| DO YOU LIVE IN THE CITY OF ALLENTOWN:YES | NO |
| HAVE YOU EVER BEEN ARRESTED? | |
| NO | |
| IF SO, WHY? | |
| DO YOU HAVE A SIGNIFICANT "BUSINESS" OR "PROPERTY" IN ALLENTOWN? PLEASE EXPLAIN: | TEREST IN |
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| | |
| ARE YOU A REGISTERED VOTER: YES | NO |
| WHY ARE YOU INTERESTED IN THIS APPOINTMENT? BE SURE WHAT VALUE YOU WILL BRING TO THE BOARD: THIS APPOINTMENT WILL GIVE ME THE OPPURTUNITY TO | |
| ROLE AS A CITIZEN AND RESIDENT OF ALLENTOWN | CITY. AS AN |
| INDIVIDUAL MY CHARACTER IS FAIR, HONEST, AND | TRUSTWORTHY. |
| THESE VALUES WILL ALLOW HE TO SERVE AS A MO | DEL CANDIDATE |
| FOR THE BOARD. | |
| DO YOU ANTICIPATE A CONFLICT OF INTEREST BY SERVING A OF AN AUTHORITY, BOARD OR COMMISSION:YES | |
| IF YES, EXPLAIN: | |

| IF YOU ARE BEING CONSIDERED FOR I | REAPPO | DINTME | NT, PLEASE I | INDICATE |
|-----------------------------------|--------|--------|--------------|----------|
| HOW MANY TERMS YOU HAVE SERVE | DN_ | 1A | _AND THE Y | ÆAR YOU |
| WERE FIRST APPOINTED | • | 1,, | _ | |
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NOTE: This information will be used for making appointments to authorities, boards and commission and in the event you are appointed/reappointed, it may be used as a news release to identify you to the community.

Signature

7 | 70 | 17 Date

Please forward this request for appointment, along with a resume to:

Mayor'S Office City Hall 435 Hamilton Street Allentown, PA 18101