REQUEST FOR APPOINTMENT DATE AUTHORITY, BOARD OR COMMISSION YOU ARE REQUESTING APPOINTMENT TO: NAME: **HOME ADDRESS: BUSINESS** ADDRESS: TELEPHONE NO. (RESIDENCE) 4 PRESENTLY EMPLOYED BY: **JOB** TITLE: **EMPLOYMENT** (Prior):____ **EDUCATION:** HIGH SCHOOL GRADUATE: NO **COLLEGE OR UNIVERSITY GRADUATE** YES NO **DEGREE/FIELD OF STUDY CURRENT MEMBERSHIP IN ORGANIZATIONS AND OFFICES:**

PAST ORGANIZATIONAL MEMBERSHIP AND OFFICES HELD:		
DO YOU LIVE IN THE CITY OF ALLENTOWN:	YES	NO
HAVE YOU EVER BEEN ARRESTED?		
IF SO, WHY?		
DO YOU HAVE A SIGNIFICANT "BUSINESS" OR ALLENTOWN? PLEASE EXPLAIN:	"PROPERTY" INTEREST	IN
ARE YOU A REGISTERED VOTER:	YES	NO
WHY ARE YOU INTERESTED IN THIS APPOINTS	-	
WHAT VALUE YOU WILL BRING TO THE BOAR		TODE
DO YOU ANTICIPATE A CONFLICT OF INTERES OF AN AUTHORITY, BOARD OR COMMISSION:	ST BY SERVING AS A MEM_ YES	IBER NO
IF YES, EXPLAIN:		

IF 100 ARE BEING CONSIDERED FOR REAPPOINT	VIENT, PLEASE INDICATE
HOW MANY TERMS YOU HAVE SERVED	AND THE YEAR YOU
WERE FIRST APPOINTED .	
NOTE: This information will be used for making appointm	ents to outhorities, boords and
commission and in the event you are appointed/rea	ppointed, it may be used as a
news release to identify you to the community.	
(1)	. / /
(1)	00/10/00/9
HAM COLD I	40/19/2014
Signature	Date
(Date

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

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