



## City of Goldsboro Boards and Commissions

Councilmember Antonio Williams, District 1  
Councilmember Bill Broadaway, District 2  
Councilmember Mark Stevens, District 3

**Mayor Chuck Allen**

Councilmember Bevan Foster, District 4  
Councilmember David Ham, District 5  
Councilmember Gene Aycock, District 6

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Business Address: \_\_\_\_\_ Business Name: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Email: \_\_\_\_\_

List any Board, Committee or Commission on which you currently serve: \_\_\_\_\_

How did you hear about serving on a Board? \_\_\_\_\_

Yearly appointments to all boards and commissions are normally made by January 1 of each year, except in cases of unanticipated vacancies which shall be filled as soon as possible.

### Application for Appointment to:

Please mark your 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> choice by putting a 1, 2 or 3 next to the Board or Commission you would like to serve on.

- |   |   |
|---|---|
| _____ Commission on Community Relations and Development | _____ Goldsboro Housing Authority               |
| _____ Historic District Commission                      | _____ Planning Commission / Board of Adjustment |
| _____ Mayor's Committee for Persons with Disabilities   | _____ Goldsboro Municipal Golf Course Committee |
| _____ Parks & Recreation Advisory Commission            | _____ Goldsboro Tourism Council                 |
| _____ Local Firefighters' Relief Fund Board of Trustees |   |

**If necessary, please use the back of this form to answer the following questions:**

Why are you interested in serving on a Board? \_\_\_\_\_

List any special qualifications you have for service on one or more Boards: \_\_\_\_\_

What would you like to achieve if appointed to a Board? \_\_\_\_\_

Educational Background: \_\_\_\_\_

Employment History: \_\_\_\_\_

*We ask your help in assuring diversity of membership by district, gender, and race by answering the following questions:*

Race: \_\_\_\_\_ Gender: \_\_\_\_\_

*City of Goldsboro residency is required for appointment to most boards and commissions.*

I am a resident from (check one): District 1 \_\_\_ District 2 \_\_\_ District 3 \_\_\_ District 4 \_\_\_ District 5 \_\_\_ District 6 \_\_\_

I have been a resident of the City of Goldsboro for \_\_\_ years.

By checking this box I understand that a Background Check may be done on me.

Return application to:  
City Clerk's Office  
200 North Center Street  
Goldsboro, NC 27530  
Phone: 919-580-4330

\_\_\_\_\_  
**Signature of Applicant** (this application will be kept on file for one year)

*The City of Goldsboro does not discriminate on the basis of race, color, religion, sex, age, national origin, handicap or disability in admission or access to or treatment or employment in its services, programs and activities in compliance with applicable federal and state laws. Information given on this application is public record.*