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 1st, 2nd and 3rd 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
___ Historic District Commission
___ Mayor’s Committee for Persons with Disabilities
___ Parks & Recreation Advisory Commission
___ Local Firefighters’ Relief Fund Board of Trustees
___ Goldsboro Housing Authority
___ Planning Commission / Board of Adjustment
___ Goldsboro Municipal Golf Course Committee
___ Goldsboro Tourism Council

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.

Applications will be kept on file for 1 year.

______________________________
Signature of Applicant

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.

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