

Committee Application



Submit Forms:
One Municipal Plaza, Suite One
Beacon, NY 12508

Phone: (845) 838-5010
FAX: (845) 838-5012
Email: cityofbeacon@cityofbeacon.org

Name

Address

Phone Number

Alternate Phone

Email Address

Committee You are
Interested In

- ☐ Board of Assessment Review
- ☐ Board of Ethics
- ☒ Conservation Advisory Committee
- ☐ Emergency Management Committee
- ☐ Human Relations Commission
- ☐ Planning Board
- ☐ Recreation Committee
- ☐ Traffic Safety Committee
- ☐ Zoning Board of Appeals
- ☐ Any of the above
- ☐ Other

Available number of
Hours per week (for
Committee work)

Occupation

Employer

Work Address

Work Phone

Education

- ☐ Some High School
☐ High School Diploma
☐ Some College
☐ Associates Degree
☒ Bachelor's Degree
☐ Master's Degree
☐ Doctorate Degree

Interest & Skills

Interests: Local economic development, environmental conservation/sustainability, food/bev/tourism/hospitality

**Areas of Expertise
(business & civic)**

Entrepreneurship, nonprofit management, business/financial acumen

Reference

Reference Name

Erin Wheeler

Address

Beacon, NY 12508

Phone

Email Address

@gmail.com

Relationship

Spouse

Applicant Signature: _____



Date: **05/31/19**