Committee Application



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

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

7,000	
Name	Karen Quiana
Address	Beacon
Phone Number	
Alternate Phone	
Email Address	@ amail.com
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)	2-4 + northly meeting
Occupation	Landscape Designer.
Employer	Self employed - LQ Design
Work Address	514 Main St. Beacon NY
Work Phone	

Education	☐ Some High School	
	☐ High School Diploma	
	☐ Some College	
	☐ Associates Degree	
	☐ Bachelor's Degree	
	Master's Degree - Lands cape Archikehir	e.
	Doctorate Degree	
Interest & Skills	skills: design + planning, communications Jerest: environmental issues, resilient commun.	ities
Areas of Expertise (business & civic)	Master planning for sites, Landscape design, code review	
Reference		The state of the s
Reference Name	David Burke	
Address		
Phone		
Email Address		
Relationship	acquaintance	
Applicant Signature:	Date:	10.7.19