

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	<input type="text" value="Elaine Ciaccio"/>
Address	<input type="text" value="Beacon NY 12508"/>
Phone Number	<input type="text"/>
Alternate Phone	<input type="text"/>
Email Address	<input type="text" value="@aol.com"/>
Committee You are Interested In	<input type="checkbox"/> Board of Assessment Review <input type="checkbox"/> Board of Ethics <input type="checkbox"/> Conservation Advisory Committee <input type="checkbox"/> Emergency Management Committee <input type="checkbox"/> Human Relations Commission <input checked="" type="checkbox"/> Planning Board <input type="checkbox"/> Recreation Committee <input type="checkbox"/> Traffic Safety Committee <input checked="" type="checkbox"/> Zoning Board of Appeals <input type="checkbox"/> Any of the above <input type="checkbox"/> Other <input type="text"/>
Available number of Hours per week (for Committee work)	<input type="text" value="not restricted"/>
Occupation	<input type="text" value="retired"/>
Employer	<input type="text"/>
Work Address	<input type="text"/>
Work Phone	<input type="text"/>

Education

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

Interest & Skills

Detailed oriented, community development, well spoken

Areas of Expertise
(business & civic)

Past licensed real estate agent. Teacher assistant BCSD. Participated in The Peoples committee on Development

Reference

Reference Name

Dena Wood

Address

[Redacted] Beacon NY 12508

Phone

[Redacted]

Email Address

[Redacted]@gmail.com

Relationship

Friend

Applicant Signature:

Elaine Ciaccio

Date:

12/30/19