COMMITTEE MEMBERSHIP FORM
COMMUNITY BOARD No. 1 – BROOKLYN
(NON-BOARD MEMBER)

NAME
Check One: Mr. ___  Mrs. ___  Ms. ___  Dr. ___  Rev. ___  Rabbi: ___  Other (Specify) __________

(Last)     (First)    (Middle)  (Title e.g. Esq., P.E.)

COMMITTEE OF INTEREST:
___________________________________________________________________

QUALIFICATIONS
Note: A member must have a residence, business or a professional or other “significant interest” in the
district.
What is the basis for your qualification for membership?
Residence ___________  Business ___________  Profession ___________

If none of the above, describe your significant interest fully:
___________________________________________________________________
___________________________________________________________________

PRIMARY RESIDENCE
Home address and street ___________________________________________  Apt. No. _______
Borough _________________________ Zip ______________  Email Address: __________________________
Home Tel. No. __________________  Cell Phone No. ________________  Fax No. ________________

PROPERTIES IN COMMUNITY DISTRICT
Other than your personal residence, list any real property you own or have a financial interest within the
Community District
Address & Street __________________________________________________________  Zip ______________

EMPLOYMENT
Your Title/Position: __________________________________________________________
Employer/Firm Name: _________________________________________________________
Work Address __________________________________________________________________
Job Tel. No. __________________  Years With Firm __________________
If less than one year with present firm, list previous employer:
Employer/Firm Name: _________________________________________________________
Work Address __________________________________________________________________

PUBLIC OFFICES
List all elected or appointed official offices you currently hold:

EDUCATION
Most advanced degree received: Circle one and specify grade or degree type (e.g. 8, B.A., M.S.)
1-12 __________ HS __________ College __________ Graduate _________ Other (specify) __________
School or institution: ____________________________________________________________

SPECIAL SKILLS/KNOWLEDGE
Describe your special skills or knowledge that could benefit the Community Board.
CIVIC/COMMUNITY INVOLVEMENT

Print neatly below the full name of community-based and local civic organizations you are currently involved in and indicate whether you are President, an officer, or a member.

1. ______________________________________________________ Pres. _____ Officer _____ Memb. _____
2. ______________________________________________________ Pres. _____ Officer _____ Memb. _____
3. ______________________________________________________ Pres. _____ Officer _____ Memb. _____
4. ______________________________________________________ Pres. _____ Officer _____ Memb. _____
5. ______________________________________________________ Pres. _____ Officer _____ Memb. _____
6. ______________________________________________________ Pres. _____ Officer _____ Memb. _____

List other organizations you belong to (business, religious, charitable) and other civic or charitable activities.
__________________________________________________________________________________________
__________________________________________________________________________________________

COMMUNITY BOARD BACKGROUND

Have you ever been a member of a Community Board? Yes ______ No ______
If yes: Community Board No. ___________ Dates (from – to) ___________________________
Do you serve on any committees of the Board you are applying to? Yes ______ No ______
If Yes: Which one(s):  ________________________________________________________________________
__________________________________________________________________________________________

REFERENCES

List three character references. Do not use family members, or the Chair, District Manager or Councilmember of the Board.

____________________________ ____________________________________________________________
(Mr., Ms., …)    Address    Apt. # Town   Zip

____________________________ ____________________________________________________________
(Mr., Ms., …)    Address    Apt. # Town   Zip

____________________________ ____________________________________________________________
(Mr., Ms., …)    Address    Apt. # Town   Zip

____________________________ ____________________________________________________________
(Mr., Ms., …)    Address    Apt. # Town   Zip

OPTIONAL

If you are a member of a particular segment of the community (e.g., the disabled, an ethnic group, tenants, business, etc.) and would help represent it, please explain:
__________________________________________________________________________________________

IDENTIFICATION AND STATEMENT

I am a U.S. Citizen: Yes ______ No ______ If no, resident alien? Yes ______ No ______
Date of Birth _____________________________

I (check one) have ________ have never ________ been convicted of a misdemeanor or felony. (If you have, describe and explain on a separate sheet of paper and attach it to the application.)
__________________________________________________________________________________________

Kindly return completed application to:  CHAIRPERSON DEALICE FULLER
COMMUNITY BOARD NO. 1
435 GRAHAM AVENUE
BROOKLYN, NY 11211

I hereby affirm that all the above information is true.

Signature of Applicant: _______________________________    Date: ________________________