

CITY OF KINGSTON

Office of the Mayor

mayor@kingston-ny.gov

Steven T. Noble
Mayor



General Application for City of Kingston Commission/Board

Name of Commission/Board/Advisory Committee: _____

Applicant name: _____ Date of application: _____

Address: _____

Telephone (home) _____ (work) _____

Emergency Contact: Name _____ Phone _____

Length of residence in City (if resident) _____

E-Mail Address:

Occupation(s)/place of business _____

Education: *(schools/degrees/specialties)*

Why are you interested in this position?

What particular strengths would you bring to this position?

Experience and community affiliations:

Please attach any other information you believe would be relevant:
