



## City of Goldsboro Boards and Commissions

Councilmember Hiawatha Jones, District 1  
Councilmember Chris Boyette, District 2  
Councilmember Jamie Taylor, District 3

**Mayor Charles Gaylor, IV**

Mayor Pro Tem Brandi Matthews, District 4  
Councilmember Beverly Weeks, District 5  
Councilmember Rod White, District 6

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Business Address: \_\_\_\_\_ Business Name: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Email: \_\_\_\_\_

List any Board, Committee, or Commission on which you currently serve: \_\_\_\_\_

How did you hear about serving on a Board? \_\_\_\_\_

Yearly appointments to all boards and commissions are normally made by January 1 of each year, except in cases of unanticipated vacancies, which shall be filled as soon as possible.

### Application for Appointment to:

Please mark your 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> choice by putting a 1, 2, or 3 next to the Board or Commission you would like to serve on.

- |  |  |
|--|--|
| <input type="checkbox"/> Commission on Community Relations and Development | <input type="checkbox"/> Planning Commission / Board of Adjustment         |
| <input type="checkbox"/> Historic District Commission                      | <input type="checkbox"/> Goldsboro Tourism Council                         |
| <input type="checkbox"/> Mayor's Committee for Persons with Disabilities   | <input type="checkbox"/> Local Firefighters' Relief Fund Board of Trustees |
| <input type="checkbox"/> Parks & Recreation Advisory Commission            |  |

**If necessary, please use the back of this form to answer the following questions:**

Why are you interested in serving on a Board? \_\_\_\_\_

List any special qualifications you have for service on one or more Boards: \_\_\_\_\_

What would you like to achieve if appointed to a Board? \_\_\_\_\_

Educational Background: \_\_\_\_\_

Employment History: \_\_\_\_\_

*We ask your help in assuring diversity of membership by district, gender, and race by answering the following questions:*

Race: \_\_\_\_\_ Gender: \_\_\_\_\_

*City of Goldsboro residency is required for appointment to most boards and commissions.*

I am a resident from (check one): District 1 \_\_\_\_\_ District 2 \_\_\_\_\_ District 3 \_\_\_\_\_ District 4 \_\_\_\_\_ District 5 \_\_\_\_\_ District 6 \_\_\_\_\_

I have been a resident of the City of Goldsboro for \_\_\_\_\_ years.

By checking this box I understand that a Background Check may be done on me.

Return application to:  
City Clerk's Office  
200 North Center Street  
Goldsboro, NC 27530  
Phone: 919-580-4330

\_\_\_\_\_  
**Signature of Applicant** (this application will be kept on file for one year)

*The City of Goldsboro does not discriminate on the basis of race, color, religion, sex, age, national origin, handicap, or disability in admission or access to or treatment or employment in its services, programs, and activities in compliance with applicable federal and state laws. Information given on this application is public record.*