

WILKES-BARRE CITY

George C. Brown  
Mayor



40 East Market Street  
Wilkes-Barre, PA 18711

PENNSYLVANIA

**APPLICATION FOR APPOINTMENT  
TO A CITY OF WILKES-BARRE  
AUTHORITY, BOARD, OR COMMISSION**

**Please complete this form and return it to:  
Mayor's Office, 4<sup>th</sup> Floor, Wilkes-Barre City Hall,  
40 East Market Street, Wilkes-Barre, PA 18711**

**DATE SUBMITTED:** \_\_\_\_\_

**APPLICANT'S NAME:** \_\_\_\_\_

**RESIDENTIAL ADDRESS:** \_\_\_\_\_

**CITY, STATE, ZIP CODE:** \_\_\_\_\_

**CELL/ WORK PHONE:** \_\_\_\_\_ **HOME PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

PLEASE SELECT THE AUTHORITIES, BOARDS, OR COMMISSIONS YOU ARE  
INTERESTED IN APPLYING FOR APPOINTMENT TO:

- \_\_\_\_\_ BOARD OF APPEALS – BUILDING INSPECTION
- \_\_\_\_\_ BOARD OF HEALTH
- \_\_\_\_\_ BOARD OF REVISION OF TAXES AND APPEALS
- \_\_\_\_\_ DOWNTOWN DEVELOPMENT AUTHORITY
- \_\_\_\_\_ ENTERPRISE ZONE COMMITTEE
- \_\_\_\_\_ FIRE CIVIL SERVICE COMMISSION
- \_\_\_\_\_ GENERAL MUNICIPAL AUTHORITY
- \_\_\_\_\_ HOUSING AUTHORITY
- \_\_\_\_\_ HUMAN RELATIONS COMMISSION
- \_\_\_\_\_ INDUSTRIAL DEVELOPMENT AUTHORITY
- \_\_\_\_\_ PARKING AUTHORITY
- \_\_\_\_\_ PLANNING COMMISSION
- \_\_\_\_\_ POLICE CIVIL SERVICE COMMISSION
- \_\_\_\_\_ REDEVELOPMENT AUTHORITY
- \_\_\_\_\_ RIVERFRONT PARKS COMMITTEE
- \_\_\_\_\_ SHADE TREE COMMISSION
- \_\_\_\_\_ TRAFFIC COMMITTEE
- \_\_\_\_\_ WILKES-BARRE POLICE ADVISORY COMMITTEE\*

*\*Membership Requires Signing of Confidentiality and Nondisclosure Agreement*

- \_\_\_\_\_ WILKES-BARRE FINANCE AUTHORITY
- \_\_\_\_\_ WYOMING VALLEY SANITARY AUTHORITY
- \_\_\_\_\_ ZONING HEARING BOARD

**CURRENT EMPLOYMENT:**

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**POSITION:** \_\_\_\_\_

**EDUCATION:**

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**CURRENT OR PAST SERVICE ON AN AUTHORITY, BOARD OR COMMISSION  
(please include dates of service):**

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**EXPERIENCE/TRAINING (relevant to appointment):**

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**CIVIC ORGANIZATIONS/AFFILIATIONS:**

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**You are welcome to attach a resume to this application and/or a  
statement explaining your interest.**

**Please be aware that all appointees will be required to complete a Statement  
of Financial Interest to be submitted to the State Ethics Commission.**

**Please contact the Mayor's Office at 570-208-4158 or  
[tryan@wilkes-barre.pa.us](mailto:tryan@wilkes-barre.pa.us) with any questions regarding this application  
or the appointment procedure.**

**Thank you for your interest in serving the residents of the City of Wilkes-Barre.**

**CITY OF WILKES-BARRE AUTHORITIES, BOARDS, &  
COMMISSIONS APPLICANT QUESTIONNAIRE**

PLEASE COMPLETE THE FOLLOWING:

1. Are you a United States Citizen? \_\_\_\_\_
2. Are you a resident of Wilkes-Barre, Pennsylvania? \_\_\_\_\_
3. Have you ever been convicted of a crime or have you plead  
“guilty” or “no contest” to a crime? \_\_\_\_\_  
If yes, please explain:  
\_\_\_\_\_  
\_\_\_\_\_
4. Are you an Elected Official of Wilkes-Barre? \_\_\_\_\_
5. Are you a City of Wilkes-Barre Employee? \_\_\_\_\_
6. Are you employed or compensated by any individual or business  
serving as a contractor to the City of Wilkes-Barre or any City  
authority, board or commission? \_\_\_\_\_
7. Do you serve as a paid consultant to the City of Wilkes-Barre or  
City authority, board or commission? \_\_\_\_\_
8. Are you as an individual or a business you own and/or operate or  
manage, serving as a contractor to the City of Wilkes-Barre or any  
City authority, board or commission? \_\_\_\_\_
9. Are you a member of any other City of Wilkes-Barre authority,  
board or commission? \_\_\_\_\_. If yes, please list:  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Print your name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**For Mayor's Office Use Only**

Date Received: \_\_\_\_\_

Received By: \_\_\_\_\_