

DATE SUBMITTED: _____

APPLICATION FOR APPOINTMENT
TO A LUZERNE COUNTY AUTHORITY, BOARD OR COMMISSION (ABC)

APPLICANT'S NAME: _____

RESIDENTIAL ADDRESS: _____

HOME PHONE: _____

REGISTERED VOTER YES NO

WORK PHONE: _____

EMAIL: _____

THE FOLLOWING AUTHORITIES, BOARDS, AND COMMISSIONS ARE OPEN TO CITIZEN PARTICIPATION. PLEASE INDICATE YOUR AREA OF INTEREST (CHECK ALL THAT APPLY):

*(PLEASE NOTE: SOME ABCS HAVE SPECIFIC REQUIREMENTS FOR APPOINTMENTS. PLEASE REFER TO **ARTICLE VIII** OF THE HOME RULE CHARTER FOR GENERAL RESTRICTIONS THAT MAY APPLY.)*

ACCOUNTABILITY, CONDUCT AND ETHICS COMMISSION (POLITICAL PARTY _____)

ADVISORY COUNCIL ON AGING

AGRICULTURAL PRESERVATION BOARD

ARTS ADVISORY BOARD

BLIGHTED PROPERTY REVIEW COMMITTEE

CHILDREN AND YOUTH ADVISORY BOARD

CONSERVATION DISTRICT

CONVENTION CENTER AUTHORITY

COUNTY CARES COMMISSION

DRUG AND ALCOHOL EXECUTIVE COMMISSION

ELECTIONS AND REGISTRATION BOARD (POLITICAL PARTY _____)

FLOOD PROTECTION AUTHORITY/LEEVE MITIGATION ADVISORY BOARD

FORTY FORT AIRPORT ADVISORY BOARD

HOSPITAL AND HIGHER EDUCATION AUTHORITY

HOUSING AUTHORITY

INDUSTRIAL DEVELOPMENT AUTHORITY

LUZERNE COUNTY COMMUNITY COLLEGE BOARD OF TRUSTEES

MH/DEVELOPMENTAL SERVICES PROGRAM ADVISORY BOARD

PLANNING COMMISSION

RECREATIONAL FACILITIES BOARD

REDEVELOPMENT AUTHORITY

TAX ASSESSMENT APPEALS BOARD

TOURIST PROMOTION AGENCY

TRANSPORTATION AUTHORITY

WORKFORCE INVESTMENT BOARD

ZONING HEARING BOARD

CURRENT EMPLOYMENT:

POSITION:

EDUCATION:

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

EXPERIENCE/TRAINING (relevant to appointment):

CIVIC ORGANIZATIONS/AFFILIATIONS:

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

**Please return completed application and questionnaire to:
Luzerne County Courthouse
ATTN: Clerk of Council -ABC applications
200 N. River Street
Wilkes-Barre, PA 18711-1001**

All appointees will be required to complete a Statement of Financial Interest to be submitted to the State Ethics Commission.

Please contact the Clerk of County Council, Sharon Lawrence, at 570-825-1634 or Sharon.Lawrence@luzernecounty.org with any questions regarding this application or the appointment procedure. Receipt of your application will be acknowledged by email.

Thank you for your interest in serving the residents of Luzerne County!

LUZERNE COUNTY AUTHORITIES, BOARDS, & COMMISSIONS APPLICANT QUESTIONNAIRE

PLEASE ANSWER THE FOLLOWING QUESTIONS:

YES NO

1. Are you a United States citizen?		
2. Are you a resident of Luzerne County?		
3. Have you ever been convicted of a crime, or have you pleaded "no contest" to a crime?		
IF YES, please explain:		

4. Are you an elected official of Luzerne County?		
5. Have you received wages from Luzerne County within the past year? (including pollworker pay, etc.)		
6. Are you employed or compensated by any individual or business serving as a contractor to Luzerne County or to any County authority, board, or commission?		
7. Do you serve as a paid consultant to Luzerne County or to any Luzerne County authority, board, or commission?		
8. Do you as an individual or a business you own and/or manage serve as a contractor to Luzerne County or to any Luzerne County authority, board, or commission?		
9. Are you a member of any other Luzerne County authority, board, or commission?		
IF YES, please list:		

I AFFIRM THAT MY ANSWERS TO THE ABOVE QUESTIONS ARE TRUE AND ACCURATE.

PRINT NAME: _____

SIGNATURE: _____ **DATE:** _____