

**CITY OF JERSEY CITY**  
**Office of the City Clerk**  
280 Grove Street  
Jersey City, New Jersey 07302

Robert Byrne, R.M.C., City Clerk  
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Tolonda Griffin-Ross, Deputy City Clerk

Telephone: (201) 547-5150  
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**APPLICATION FOR MUNICIPAL PUBLIC SERVICE**

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

*I, hereby apply to perform public service on the following municipal authorities, boards or commissions:*

a) \_\_\_\_\_

b) \_\_\_\_\_

c) \_\_\_\_\_

Name: \_\_\_\_\_

Address of Residence: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Education related to the authorities, boards or commissions of choice:

\_\_\_\_\_

Volunteer or work related experience which could be of use to the authorities, boards or commissions of choice:

\_\_\_\_\_

\_\_\_\_\_

Previous meeting attendance at, or volunteer work for, the authorities, boards or commissions of choice:

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_