

APPLICATION FOR GUBERNATORIAL APPOINTMENT

Thank you for your interest in serving on a board or commission in the State of Rhode Island. We will require a copy of your resume with complete education, employment, and professional history information for all appointments. Please be advised that certain appointments have additional statutory or other requirements. The Governor's office will process your application and contact you with any further questions or other required follow-up. Please return this completed form and your resume to Gov.Boards@governor.ri.gov. Please answer all questions completely.

Which RI State board(s), commission(s), and/or council(s) are you applying for?

Personal Information

First Name _____

Middle Name _____

Last name _____

Suffix _____

Date of Birth _____ Last four of Your SS# _____

Home address 1 _____

Home address 2 _____

City _____

State _____

Zip Code _____

Are you a year-round resident? _____

Home Phone _____

Cell Phone _____

Email Address _____

Employer Name and Address _____

Occupation _____

Job Title _____

Business Phone _____

Business Email _____

Have you ever been elected or appointed to public office (including other boards or commissions)?

Yes _____

No _____

If yes, please list, including dates held.

Have you held or do you hold an occupational or professional license or certificate in the State of Rhode Island or any other state?

Yes _____

No _____

If yes, please list, including dates held.

Have you been, or are you now, a registered lobbyist¹?

Yes _____

No _____

Have (1) you, (2) any member of your immediate family (includes: spouse, domestic partner², child, parent, or sibling), or (3) any business in which you or an immediate family member has been an owner, officer, or employee had any contractual or other direct dealings with the State of Rhode Island or any government agency during the last 5 years?

Yes _____

No _____

If yes, please list all.

¹ "Lobbyist" as defined in [R.I. Gen. Laws § 42-139.1-3\(5\)](#).

² "Domestic partner" as defined in [R.I. Gen. Laws § 36-10-40](#).

Have you ever been convicted of a violation of any federal, state, county, or municipal law, regulation, or ordinance (except traffic violations for which a fine or civil penalty of \$250 or less was paid)?

Yes

No _____

If yes, please explain.

Personal References

Please list three persons unrelated to you that we can contact as a reference for your appointment.

Please include name, occupation, address, email, and phone number.

Diversity and Inclusion

The following optional information is requested to ensure that the Governor’s office considers the talent and experience of a diverse pool of candidates. In addition, specific representation is statutorily required on certain boards and commissions. Your voluntary responses to the following questions help the Administration ensure compliance with such requirements.

Political Affiliation

Democrat _____

Independent _____

Republican _____

Unaffiliated _____

Not Registered _____

Other _____

Gender? _____

Race and Ethnicity (Please indicate all that apply to you)

Asian _____

Black or African American _____

Hispanic or Latino _____

Native American or Alaska Native _____

Native Hawaiian or Pacific Islander _____

White _____

Other _____

Do you identify as a member of the LGBTQ+ community?

Yes _____

No _____

Please list any Military Service

Are you a person with disability?

Yes _____

No _____

Authorization and Attestation

We may conduct a background investigation for certain board appointments. By signing below, I hereby authorize that my criminal record history be released to the Governor or the Governor’s representatives. I further authorize the disclosure of my application, and all related materials submitted in connection therewith, to the Rhode Island Senate should I be appointed by the Governor to a position that requires the advice and consent of the Senate.

By signing below, I certify that the information in this application is true, complete, and correct.

SIGNATURE: _____

Print Full Name: _____

Date: _____