



Application for Boards and Commissions

City of New Haven, CT

Submitted On:

Jan 19, 2024, 06:36AM EST

Full Name	First Name: Darnell Last Name: Young
Email	dyoungdmd005@yahoo.com
Are you a current New Haven resident?	Yes
Full Address	Street Address: 61 Alston Avenue City: New Haven State: CT Zip: 06515
Phone Number	8607947583
Are you a registered voter in New Haven?	Yes
What political party do you belong to? [This information is only requested as it is required by the city charter (Article X Sec. 2-551) to ensure minority party representation on boards and commissions]	Democratic Party
What is your current occupation?	Pediatric Dentist
Please upload a resume, short bio or personal statement of interest	Dr. Young's CV .pages
New Haven Boards & Commissions Listed	Board of Public Health
Please explain why you are interested in serving on this board/commission?	I am interested in serving on the board of health because I believe keeping the public informed, protected, and updated in regard to health, wellness, and public safety is of utmost importance.
Why do you believe you are a good fit for this board/commission?	I feel that my experience of serving on a board of public health, being a part of a Head Start health advisory committee, staying committed to the community and community service, and experience working with a dedicated team, in order to serve the greater good, make me a worthy fit to serve on the board of public health.
Do you have any time commitments that would prevent you from participating in the board/commission meetings?	For any scheduled meetings. No.

