



Application for Boards and Commissions

City of New Haven, CT

Submitted On:

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Full Name	First Name: Robert Last Name: Megna
Email	robmegna@comcast.net
Are you a current New Haven resident?	Yes
Full Address	Street Address: 40 Foxon Hill Road 54 City: New Haven State: CT Zip: 06513
Phone Number	2034940995
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]	democrat
What is your current occupation?	Retired
Please upload a resume, short bio or personal statement of interest	BAA RESUME.pdf
New Haven Boards & Commissions Listed	Board of Assessment Appeals
Please explain why you are interested in serving on this board/commission?	I have extensive knowledge and background
Why do you believe you are a good fit for this board/commission?	A lifetime of experience at all levels
Do you have any time commitments that would prevent you from participating in the board/commission meetings?	No