Boards and Commissions Application

Thank you for your interest in participating on a New Haven City Board or Commission.

This is important work to ensure government is run effectively and efficiently and that the community has a strong voice in City decision making. Your willingness to represent the community on a Board or Commission is deeply appreciated.

Please fill out the application form below to give us more information on yourself, your interests, and your experience, to help us determine whether you are a good fit for this volunteer role.

Please reach out to Barbara Montalvo, bmontalvo@newhavenct.gov, or by phone: (203) 946-7670 with any questions about the process.

--Mayor Justin Elicker

First Name:	Mabel L.	Last Name:	CaRRoll
Address:	Street: 130 Wilmot Rd Apt 214		
	City: New Haven State: CT	Zip Code:	06515
Email Address:			
Phone Number:	203-387-0778		
Is this a mobile number?	YES NO	Can we text you on this number?	YES (NO)
Are you registered to vote in New Haven?	(YES) NO		
Are you currently a New Haven Resident	(YES) NO		
*What is your political party registration?	Democrat		

[*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]

What is your current occupation?	Retired

Please submit either a resumé or personal statement of interest with this application.

Please select the Board(s) and/or Commission(s) you are interested in serving on. You may apply for more than one, but you can only serve on ONE Board or Commission at a time if you are selected for an appointment.

- ☐ Advisory Board for the Q-House
- ☐ Affordable Housing Commission
- ☒ Aging Commission
- ☐ Board of Assessment Appeals
- ☐ Board of Education
- ☐ Board of Ethics
- ☐ Board of Fire Commissioners
- ☐ Board of Park Commissioners
- ☐ Board of Library Directors
- ☐ Board of Police Commissioners
- ☐ Board of Commissioners of New Haven's Port Authority
- ☐ Board of Public Health
- ☐ Board of Zoning Appeals
- ☐ Cable TV Advisory Council
- ☐ Capital Projects Committee
- ☐ City Employees Retirement Fund (CERF)
- ☐ City Plan Commission
- ☐ City Wide Building Committee
- ☐ Civilian Review Board
- ☐ Civil Service Commission
- ☐ Commission on Affirmative Action
- ☐ Commission on Disabilities
- ☐ Commission on Equal Opportunities
- ☐ Cultural Affairs Commission
- ☐ Development Commission
- ☐ Environmental Advisory Council
- ☐ Greater New Haven Water Pollution Control Authority (GNHWPA)
- ☐ Historic District Commission
- ☐ Homeless Advisory Commission
- ☐ Housing Authority
- ☐ Humane Commission
- ☐ Lead Poisoning Advisory Committee
- ☐ Litigation Settlement Committee
- ☐ Livable City Initiative Board
- ☐ New Haven Democracy Fund Board
- ☐ New Haven Food Policy Council
- ☐ Paraprofessional Money Plan
- ☐ Parking Authority
- ☐ Peace Commission
- ☐ Pension Taskforce
- ☐ Police and Fire Retirement Fund (PFRF)
- ☐ Mental Health Catchment Area Council #
- ☐ Property Acquisition & Disposition Committee
- ☐ Redevelopment Agency
- ☐ Regional Water Authority (RWA) of South Central Connecticut
- ☐ Solid Waste and Recycling Authority Board
- ☐ Greater New Haven Transit District - Board of Directors
- ☐ Traffic Authority
- ☐ Tweed New Haven Airport Authority Board
- ☐ Wooster Square Monument Committee
- ☐ 401(a) Profit Sharing Plan

2022 Disclosure Form for the City of New Haven Employees, Officials & Members of Boards and Commissions

Section I. Personal Information

First Name	Middle Name	Last Name
Mabel	L.	CaRRoll

Street Address (Home)	City	Zip
130 Wilmot Rd. Apt 214	New Haven	CT 06515

Employer	Position Held
Retired	

Street Address (Business)	City	Zip

Home Phone	Business Phone	Cell Phone

Board, Commission or Task Force (if applicable)	Term Expires (if applicable)

Email Address:

Section II. Interests Requiring Disclosure

Please provide the following information for the calendar year 2021. Some questions may request information about your *immediate family* or *household*. Immediate family means: your spouse or partner, your parent, sibling or child, your spouse's parent, sibling or child, the spouse or partner of said child, or other dependent relative who resides in your house. Household means: all individuals residing in a single housing unit, including related and unrelated people. If the answer to any question is none, please indicate NONE in the space provided. Please attach additional pages as needed.

1. Are you or any member of your immediate family or household employed by the City of New Haven?

Name	Relationship	Position Held	Term Expires (if applicable)

2. Do you have a financial or personal interest in any City of New Haven contract, including any contract entered into prior to your nomination, appointment, election or employment to your position?

Contract Name	Contract Amount	Expiration Date of Contract

3. Are you seeking or have you obtained employment with a person, company or corporation engaged in business with the City of New Haven?

Person, company or corporation	Position sought or gained

4. Have you or a member of your immediate family or household applied for a City of New Haven program or benefit over which you have actual or apparent control, influence or discretionary authority?

City program or benefit

5. List any reimbursement of necessary expenses incurred that are due to an article, appearance, or speech, or for participation in any event in your official capacity. Please attach additional pages as needed.

None			

6. Have you accepted an offer of employment, whether paid or unpaid, by the City of New Haven or by a program established by the board, commission or task force of which you are a part?

Agency, business or institution
None

7. Please list any non-municipal (including nonprofit) agency, or entity by which you are employed which is funded by monies authorized or provided by the City of New Haven.

	None	

8. Please list any nonprofit or other organization of which you are a member of the governing board that is, has been, or is likely to be engaged in the application for federal or state funding or local funding authorized or administered by the City of New Haven.

Agency, business or institution
None

9. Please list any nonprofit or other organization of which you are a member of the governing board that is or will be lobbying for specific legislation before the City of New Haven or State of Connecticut legislation, which will result in the City receiving funding administered by the City board, commission or task force of which you are a member.

Agency, business or institution
None

10. Please list any nonprofit or other organization of which you are a member of the governing board where said organization is, has been or may become engaged in litigation against the City of New Haven.

Agency, business or institution
None

Section III. Oath

A. I understand that I am responsible for learning and complying with all laws regarding standard of conduct for public officials contained in the City's Ethics Code and Ordinance found at Chapter 12 5/8 of the New Have Code of Ordinances available for review at http://www.cityofnewhaven.com/HumanResources/index.asp or at the Dept of Human Resources Office at 200 Orange St Room 102, New Haven, CT.

Please initial that you will comply with this section _____

B. I understand that as a public employee or official I am held to a high standard of ethical behavior. I will avoid both actual improprieties and the appearance of improprieties. I understand that the disclosures requested in this form are related to all of my interests, not just those relating to the City department, board, commission, or task force with which I am affiliated. I understand that I am responsible for updating the information on this form immediately upon any change in circumstance. I further understand that this form constitutes public information and will be disclosed upon request. If I am considering outside employment or financial arrangements with a business or person who transacts business or has financial dealings with the City of New Haven, I will consult with Senior Corporation Counsel at 203-946-7969 regarding any actual or potential ethical issues before taking any action.

Mabel Carroll — Signature

1-15 2023 — Date

Rev. 3/11 CC/HR