

CITY OF NEW BEDFORD BOARD & COMMISSION APPLICATION

The Mayor is seeking citizens who wish to serve on City Boards and Commissions established to assist and advise the City on specific matters. Please complete this application in full (attach a resume and other information which may assist the Mayor and the City Council in making its selection) and file it with the Personnel Office. The Mayor reserves the right to reject any application. Some appointments are subject to confirmation by the City Council.

Board/Commission applying for: (see reverse	side) Commission for Citizens with Disabilities	
Name: Linda Haskins	Email:	
Home Telephone:	Work Telephone: N/A	
Residence Address: 33 Robert Street New Bedford	rd MA	Zip: 02740
Present Occupation & Place of Employme	ent: Retired	
Educational Background: Bachelors of Arts in so	ociology UMASS Dartmouth	
Memberships in Community Organization Volunteer -Coalition For Social Justice	ns or Professional Groups:	
City Boards and/or Commissions on which Served on the Commission for Citizens with Disab Developmental Disabilities	h you have previously served: illities during my early years of employment	t with Dept. of
The reasons why you wish to be considere I have a physical disability as the result of polio at a weakness. I understand the issues of disability from contribute.	3 yre old I woor o full low-up to a feet	have general retired and have time to
Please detail specific areas of expertise: Service Coordinator-Mass Department of Developm Worked as case manager at Coastline Elderly Service	nental Services New Bedford Area office fr vices 1979-1991	om 1991- 2018
Please detail specific areas of interest: Accessibility issues		
Available for meetings in the daytime	evenings both (ch	eck one)
Resident of the City since what year: 1956-20	014 2018-present	
Appointees and incumbents may be required to file council Rules or the Mayor. The statement may receive of New Bedford. Please return your completed Room 212, New Bedford, MA 02740.	Ollire a declaration that you become "	
	ll be kept on file for two years.	
I DECLARE UNDER PENALTY	OF PERJURY THAT THE FOR	REGOING

Signature of Applicant: Linda Hasking Date: 2/24, 2000

INFORMATION IS TRUE AND CORRECT.



CITY OF NEW BEDFORD JONATHAN F. MITCHELL, MAYOR

March 2, 2020

City Council President Joseph P. Lopes and Honorable Members of the City Council City of New Bedford 133 William Street New Bedford, MA 02740 100 MAR -5 P 2: I

Dear Council President Lopes and Honorable Members of the City Council:

I am submitting for your approval the **APPOINTMENT** of **LINDA HASKINS** of 33 Robert Street, New Bedford, Massachusetts to **COMMISSION FOR CITIZENS WITH DISABILITIES.** Ms. Haskins will be replacing Herbert Eddleston, who resigned and has since passed away. This term will expire in May 2021.

Sincerely,

Jonathan F. Mitchell

Mayo

JFM/sds

cc: Linda Haskins

IN CITY COUNCIL, March 12, 2020

Referred to the Committee on Appointments and Briefings.

Dennis W. Farias, City Clerk

a trige copy, attest:

City Clerk