



City of Rochester, New Hampshire

CITY COUNCIL

APPOINTMENTS COMMITTEE

31 Wakefield Street • Rochester, NH 03867

(603) 332-1167

www.RochesterNH.net

June 20, 2014

TO: Appointments Committee
(Councilor Keans, Collins, Hamann, Gray)

FROM: City Councilor, John H. Larochele, Chairperson

REGARDING: **Appointments Committee Meeting**

There will be an Appointments Committee Meeting on Tuesday, July 1, 2014 at 6:00 p.m. in the Conference Room at City Hall.

AGENDA

TIME	NAME	COMMITTEE
6:00 pm	Therese Hickman	Local Rivers Advisory Committee
6:20 pm	Michael Provost	Arts & Culture Commission
6:30 pm	Cristina Dorvillier	Arts & Culture Commission

JHL:ser

Cc: Mayor and City Council
Mr. Daniel W. Fitzpatrick



LOCAL RIVER MANAGEMENT ADVISORY COMMITTEE
NOMINEE FORM

Please complete both sides of this Form and email to riversprogram@des.nh.gov or mail to Rivers Coordinator, NH DES, 29 Hazen Drive, P.O. Box 95, Concord, NH 03302-0095

Please type "NOMINEE FORM" and nominee's name in the subject line of the email.

For questions contact the Rivers Coordinator at 271-2959.

RECEIVED
JUN 17 2014

CLERK'S OFFICE
ROCHESTER, NH

NOMINEE NAME: Therese Hickman DATE: 6/10/14 [WARD 1]

RIVER NAME: Cochecho

REPRESENTING: MUNICIPALITY: Rochester OTHER: _____

Nominee Contact Information:

Street Address: 8 Stonewall Dr.

Town: Rochester

Zip Code: 03868

Email: gtjdjr6@yahoo.com

Phone (home): 603 332-3549 Phone (cell): 603-973-9794 Phone (work): N/A

Is this a: New Appointment or a Reappointment

Please state your interest(s) in serving on the Local Advisory Committee:

- Local Government
- Business
- Conservation
- Recreation
- Agriculture
- Riparian Landowners

(Form continued on page 2)

Board of Selectmen or Authorized Signature(s) – REQUIRED (e-signature acceptable)

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Note: By statute, the Commissioner of DES appoints the Local River Management Advisory Committee (LAC) members for each Designated River from nominees submitted by the local governing bodies through which the Designated River flows (RSA 483:8-a).

Please include a short description of your relevant background knowledge of local river-related issues or general river management and protection:

For the past 5+ years I have been a part of the Volunteer River Assessment Program and have worked closely with Lorie Chase. I have participated in the Cocheco River Sweep 8 times. As a teacher I help students become more aware of their environment and how they can help.

Most Local Advisory Committees engage in a variety of activities. Reviewing those activities listed below, please check those that are of most interest to you:

- Management Plan Preparation/Implementation
- Event Organization
- Public Education
- Grant Writing
- Public Relations
- Committee Administration
- Other area cleanups

Most Local Advisory Committees meet monthly. In some cases they may meet more frequently to complete specific tasks, while in other cases your attendance may not required at all meetings. Please check one of the boxes below to indicate your availability to attend regularly scheduled meetings.

- I can attend monthly meetings on most weeknights
- I can attend monthly meetings only if scheduled on a specific weeknight
- I can only attend a limited number of monthly meetings
- I cannot attend monthly meetings, but am willing to complete tasks on behalf of the Local Advisory Committee

For DES Office Use Only

1. Nominee form has been reviewed by RMPP staff on (date) _____
2. LAC Chair and Nominee have been contacted regarding nomination on (date) _____
3. RMPP Staff recommends appointment to Commissioner:
 Approve _____
RMPP staff _____ Date _____
4. Appointment letter and information packet sent on (date) _____
5. Contacts database updated (date) _____
6. LAC Member List updated (date) _____



City of Rochester, New Hampshire
 OFFICE OF THE CITY CLERK
 31 Wakefield Street • Rochester, NH 03867
 FAX (603) 509-1915 PHONE (603) 332-2130

JUN 17 2014
 CITY CLERK'S OFFICE
 ROCHESTER, NH

JUN 17 2014
 CITY CLERK'S OFFICE
 ROCHESTER, NH

**STATEMENT OF INTEREST
 BOARD AND COMMISSION MEMBERSHIP**

POSITION DESIRED: Art & Culture Commission

NEW _____ RE-APPOINTMENT REGULAR _____ ALTERNATE _____

NAME: Michael A. Provost

STREET ADDRESS: 16 Beech Street, Newmarket, NH

ZIP 03857

TELEPHONE:(H) _____ (W) _____ E-MAIL director@rochestermainstreet.org

REGISTERED VOTER: (CIRCLE ONE) YES _____ NO WARD _____

Statement of Interest/Experience/Background/Qualifications, Etc. (This section need not be completed, but any information provided will be given to all City Councilors and will be available for public inspection). (Additional sheets/information may be attached, if desired; please do not write on the back of this form.)

Executive Director, Rochester Main Street, Steering Member NH Creative Communities Network, Producer, Director, Actor, Former Summer stock company Member, Chair of Newmarket Millspice Committee

If this is an application for reappointment to a position, please list all training sessions you have attended relative to your appointed position.

National Main Streets Conferences (2), NH Governor's Conference On Tourism (2), NH Cultural Commissioners Roundtables (5)
NH Conference On Arts/Culture & Law (1)

I understand that: (1) this application will be presented to the Rochester City Council only for the position specified above and not for subsequent vacancies on the same board; (2) the Mayor and/or City Council may nominate someone who has not filed a similar application; and (3) this application will be available for public inspection.

I certify that I am 18 years of age or older: Michael A Provost



RECEIVED

JUN 20 2014

City of Rochester, New Hampshire
OFFICE OF THE CITY CLERK
31 Wakefield Street • Rochester, NH 03867
FAX (603) 509-1915 PHONE (603) 332-2130

CITY CLERK'S OFFICE
ROCHESTER, NH

To: John C.
Sam R.

**STATEMENT OF INTEREST
BOARD AND COMMISSION MEMBERSHIP**

POSITION DESIRED: Arts & Culture Commission (vice-chair)

NEW RE-APPOINTMENT REGULAR ALTERNATE

NAME: Cristina Dorvillier

STREET ADDRESS: 11 Magic Avenue

ZIP 03868

TELEPHONE: (H) 603 781 9555 (W) 603 332 2211 E-MAIL xddorvillier@yahoo.com

REGISTERED VOTER: (CIRCLE ONE) YES NO WARD 1

Statement of Interest/Experience/Background/Qualifications, Etc. (This section need not be completed, but any information provided will be given to all City Councilors and will be available for public inspection). (Additional sheets/information may be attached, if desired; please do not write on the back of this form.)

I quite enjoy being on the commission and would like to continue as the vice-chair.

If this is an application for reappointment to a position, please list all training sessions you have attended relative to your appointed position.

None

I understand that: (1) this application will be presented to the Rochester City Council only for the position specified above and not for subsequent vacancies on the same board; (2) the Mayor and/or City Council may nominate someone who has not filed a similar application; and (3) this application will be available for public inspection.

I certify that I am 18 years of age or older: