

TOWN OF PORTSMOUTH, RHODE ISLAND



BOARDS/COMMISSIONS/COMMITTEES
APPLICATION

DATE: 12/1/2020 NEW APPOINTMENT: RE-APPOINTMENT: X

BOARD/COMMISSION/COMMITTEE: Portsmouth Juvenile Hearing Board

NAME: Paul T. Kelly

WORK EXPERIENCE RELATED TO THE POSITION BEING APPLIED FOR:

Behavioral Health Clinician, Substance Abuse Counselor, Naval Health Clinic, Newport, RI. Apr 2003-present

Campus Safety Officer, St. George's School, Middletown, RI; Dec 2004-present.

Education: MSW, Boston University, Clinical Social Work, 2002; BA, psychology, UMASS Dartmouth, 1998

IF RE-APPOINTMENT: PERCENTAGE OF MEETINGS ATTENDED DURING PREVIOUS
TERM: 90%

PROVIDE A BRIEF EXPLANATION OF YOUR INTEREST IN THIS POSITION:

I have been a member of this Board since 2015. I believe the Board provides minors the opportunity
to make positive changes in their lives, through this community base approach, which can have a long
term positive impact. I would like your consideration to continue serving in the capacity as a member
of the Portsmouth Juvenile Hearing Board.

SIGNATURE OF APPLICANT: *Paul T. Kelly*

RECEIVED
PORTSMOUTH, R.I.
2020 DEC - 8 1 A 11:42
JENNIFER M. WEST
TOWN CLERK

For File Purposes Only:

NAME: Paul T. Kelly

ADDRESS: 39 Thurston Ave, Portsmouth, RI 02871

MAILING ADDRESS (if different): _____

TELEPHONE NUMBERS: HOME: 401-297-8387 WORK: 401-841-6798 CELL: 401-297-8387

EMAIL ADDRESS: ptk1014@gmail.com

For Design Review Board, Planning Board or Zoning Board applicants only:

PRESENT EMPLOYER NAME & ADDRESS: _____

LENGTH OF EMPLOYMENT: _____

IF LESS THAN 2 YEARS, PREVIOUS EMPLOYER: _____

EDUCATIONAL BACKGROUND: _____