

# PLAN: Downtown

## Advisory Group Nomination Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

Affiliation(s): \_\_\_\_\_

\_\_\_\_\_

(e.g. community groups, businesses, non-profit organizations, institutional establishments, other)

**Would this nominee fairly and accurately represent the interests of his or her affiliated group?**

Yes

No

**Briefly describe why this nominee is qualified to be a member of the Advisory Group:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**THE DEADLINE FOR SUBMISSION IS JANUARY 4, 2019 AT 5:00PM**

**Nominations should be sent to:** Kennan Rhyne, Boston Planning & Development Agency  
One City Hall Square, 9th Floor  
Boston MA 02201  
Email: Kennan.Rhyne@Boston.gov  
Phone: 617-918-4421