

AREA COMMISSION APPOINTMENT FORM

The Department of Neighborhoods maintains the database for the Area Commission members in the City of Columbus. The information on this form is used to process the Mayor's appointment and ensure timely and accurate distribution of meeting notices, training opportunities, and other City activities. **Please complete all sections of the form with information about your recently elected/appointed commissioner within seven (7) days of the election/appointment. After completing and signing this form, please return it, along with the appointees resume and/or biography to your Neighborhood Liaison via email.** Please contact your Neighborhood Liaison with any questions or comments.

Please Type

Area Commission Name	Greater Hilltop Area Commission	
Please check appropriate box	New appointment ☒ Reappointment ☐	Are there changes to this information? Yes ☒ No ☐
First Name	Adhanet	X
Last Name	Kifle	X
Title (i.e. officer / commissioner)	Commissioner	X
Address	43 S. Warren Ave.	X
City	Columbus	X
State	OH	X
Zip Code	43204	X
Home Telephone		X
Work Telephone		X
Email Address	AdhanetKifleGHAC@gmail.com	X
District/Designation	Highland West/Central Hilltop	X
Term Start Date	January 1, 2022	X
Term Expiration	December 31, 2024	X
Seat Succession	Replacing Scott Stockman	

Area Commission Chair Signature _____

*****ALL SECTIONS OF THIS FORM MUST BE COMPLETED*****

DISCLAIMER: all information and materials that you submit in support of your appointment as an area commissioner are subject to Ohio Public Records Law