



TOWN OF WOOLWICH

APPLICATION FOR APPOINTMENT TO A TOWN BOARD OR COMMITTEE

DATE: _____

FULL NAME: _____

ADDRESS: _____

EMAIL ADDRESS: _____

TELEPHONE NUMBER: _____

PLEASE STATE NAME OF BOARD OR COMMITTEE YOU ARE INTERESTED IN:

FULL MEMBERSHIP STATUS: _____

ASSOCIATE MEMBERSHIP STATUS: _____

OCCUPATION: _____

EMPLOYED: _____

WORK PHONE NUMBER: _____

LIST ANY CIVIC ORGANIZATIONS TO WHICH YOU BELONG:

NOTE ANY PRIOR EXPERIENCE, KNOWLEDGE, OR ABILITIES THAT YOU HAVE WHICH WOULD CONTRIBUTE TO THE ACTIVITIES OF THE BOARD OR COMMITTEE: _____

HAVE YOU EVER SERVED ON A TOWN BOARD OR COMMITTEE? IF SO, PLEASE LIST THE BOARD(S) OR COMMITTEE(S) AND YEARS OF SERVICE: _____

SIGNATURE

ALL APPOINTMENTS ARE MADE BY VOTE OF THE BOARD OF SELECTMEN