

Town of East Bridgewater



APPLICATION FOR APPOINTMENT/REAPPOINTMENT TO BOARDS/COMMITTEES

Name: _____ Date: _____

Board or Committee for which (re) appointment is sought: _____

Home Address: _____

Phone (For Public Use): _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____

E-Mail: _____ Release Email to public: Yes No

Occupation / Title: _____

Please describe any special knowledge, abilities, background or interests which you feel will provide a positive contribution to the goals and purposes of the board / committee for which you are seeking (re)appointment. (A resume may be attached if desired.)

What other board/committee have you served on? _____

How long did you serve on this board/committee? _____

Are you able to attend all meetings? Yes No

If no, please explain: _____

Signature: _____ Date: _____

OFFICE USE ONLY

Date Received: _____ Date on Board Agenda: _____

Term of Office: _____ Approval: Yes No

Fills Vacancy: Yes No Appointment Letter Sent: Yes No