INITIAL APPLICATION FOR APPOINTMENT TO TOWN BOARDS, COMMITTEES & COMMISSIONS

RE-APPOINTMENT TO TOWN BOARDS, COMMITTEES & COMMISSIONS

NAME: _______________________________________________________________________

RESIDENCE: ___________________________________________________________________________________

MAILING (if different) ___________________________________________________________________________________

E-MAIL ADDRESS: ______________________________ PHONE # (Home) ______________

WORK # ______________________________ CELL # ______________________________

Please check your choices:

○ Adult-Use Retail Cannabis Committee
○ Aging-In-Place Committee
○ Board of Appeals
○ Conservation Commission
○ Energy Commission
○ Planning Board
○ Solid Waste & Recycling Committee
○ Tax Increment Financing (TIF) Committee

MEMBERSHIP PREFERENCE: Regular ___  Alternate ___  No Preference  ___

APPOINTMENT TERM:  Full Term___ Partial Term___ No Preference___

EDUCATION/TRAINING: __________________________________________

RELATED EXPERIENCE (Including other Boards/Committees and Commissions)

____________________________________________________________________________

____________________________________________________________________________

PRESENT EMPLOYMENT: __________________________________________

ARE YOU 18 YEARS OR OLDER:  ○ YES  ○ NO
ACCORDING TO THE TOWN OF ELIOT ORDINANCE GOVERNING MUNICIPAL BOARDS PLEASE ANSWER THE FOLLOWING QUESTIONS.

1. Express your interest as to why you want to serve:

________________________________________________________________________

________________________________________________________________________

2. Give a brief reason(s) as to why the Select Board should support your appointment.

________________________________________________________________________

________________________________________________________________________

3. Give a brief summary as to how you will maintain an unbiased participation on a regular and continuing basis throughout term.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

4. Any know conflict of interest: ☐ YES ☐ NO if yes, please list

________________________________________________________________________

BY SUBMITTING THIS APPLICATION YOU UNDERSTAND THE FOLLOWING:

1. This application is for consideration and does not mean you will necessarily be appointed to this Board/Commission or Committee.

2. The Town Manager will review your application, may contact you, and determine any potential conflict of interests.

3. This application will be forwarded to the Select Board for consideration, the Board will want to interview possible appointees. Your application will be placed on the next available agenda.

4. Appointee agrees to take a sworn oath by Town Clerk except for Ad Hoc Committee members/Select Board Advisory Committees.

5. Applicant agrees that if appointed will attend all meetings, except for sickness or emergency, and will advise the Chairperson when you are unable to attend.

Please read the Town of Eliot, Maine Ordinance Governing Municipal Boards, Commissions, and Committees available at the Town Office or on the Town Website.

__________________________________________________________
SIGNATURE OF APPLICANT                                           DATE