



# Town of Franklinton Advisory Boards & Town Committees

## Application for Appointment

The Franklinton Board of Commissioners believe that the opportunity to participate in governmental decisions is crucial to an informed citizenry. One way to participate is by serving as a citizen member of one of the several Town Advisory Boards, Quasi-Judicial Boards or Committees.

Anyone interested in being considered for appointment to a Town Board or Committee should complete this form and mail it to the Town of Franklinton, Attention: Town Manager, PO Box 309, Franklinton, NC 27525. References should be included when indicated as a requirement.

### Demographic Information

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Home Address (if different) \_\_\_\_\_

City \_\_\_\_\_ ZIP \_\_\_\_\_

Gender: \_\_\_ Male \_\_\_ Female      Date of Birth \_\_\_/\_\_\_/\_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail \_\_\_\_\_

Do you live within the: Town Limits of Franklinton? Y N    ETJ of Franklinton? Y N (Circle one for each)

Current Occupation or Title \_\_\_\_\_

Employer/Business \_\_\_\_\_

Business (Full) Address \_\_\_\_\_

### Service Preferences

Please indicate your preferences by ranking the following 1 – 7, with 1 being the lowest priority.

\_\_\_\_\_ ABC Board

\_\_\_\_\_ Planning Board

\_\_\_\_\_ Economic Development Committee

\_\_\_\_\_ Tree Committee

\_\_\_\_\_ OneFranklinton

\_\_\_\_\_ Other Volunteer Opportunities

**Biographical Information**

Please describe your community and civic experience, either in Franklinton or another community.

---

---

---

Please indicate any particular interests, special skills or areas of expertise, or professional organizations of which you are a part that could be supportive to your work as a citizen volunteer.

---

---

---

Are you currently serving on other Town Boards or Committees? If so, please note those here.

---

---

Please describe why you wish to serve your community in this capacity, and how your contributions can be helpful to the Town. \_\_\_\_\_

---

---

Please list two personal references:

Name \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_

Relationship \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Name \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_

Relationship \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Is there any possible conflict of interest or other matter that would create problems or prevent you from fairly and impartially discharging your duties as an appointee to a Board or Committee?

---

---

---

I understand that this application will be kept active on file with the Town of Franklinton for two (2) years; after that point, a new application will need to be completed. I hereby authorize the Town of Franklinton to verify all information indicated above.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_