Town of Norwich P.O. Box 376

P.O. Box 376 Norwich VT 05055-0376 (802) 649-1419 Ext. 101 or 102

APPLICATION FOR BOARDS/COMMISSIONS (and for those reapplying for continuing appointments)

Name	e:	
Addre	ress:	
Day phone:		ening phone:
E-mai	ail:	
Position	tion Applied For:	
1.	If you are re-applying for the same board/c have you already served? Terms:	rommission, how many terms/years Years:
2.	. Would you be available for evening and/or Evening: (Yes No) Morning: (Yes No Are there other restrictions on your available).
3.	. Please list any experiences, skills and/or qu especially suit you for this appointment.	alifications which you feel would
4.	. Please include service on other municipal or Commissions, or Committees both in Norw whether or not any of those appointments a	ich and elsewhere and indicate

Tit	ame of Company: ele: escribe your work:	Location:
6.	Pertinent Education and/or Experience:	
7.	Do you feel there could be <i>any conflict of interes</i> occupation or employer in serving on this boar No). If yes, please explain:	
Comn	nents:	
Signat	cure	Date

5. Education and Current Employment