TOWN OF BARRINGTON, NH

Application For
Appointment Request – Board / Commission / Committee

Name:_____ **Phone:**_____
(last) (first) (day) (evening)

Address:_____**Email**_____

Barrington Resident Since:_____

1. **I am applying for one or more of the following in order of preference** (1-First Choice, 2-Second Choice, 3-Third Choice, etc)

____Economic Development Committee
____Planning Board
____Regional Planning Commission Rep.
____Conservation Commission
____Historical Society
____Advisory Budget Committee
____Zoning Board of Adjustment
____Recreation Commission
____Recycling Center
____Friends of the Library
____Firemen's Association
____Ambulance Association
____Food Pantry
____Other [please specify]
_____

2. **For my appointment, please consider the following:**
   a. **Occupation:**_____
   b. **Employer:**_____
   c. **Do you feel there is any "conflict of interest" with your personal beliefs, occupation or employer if appointed? _____Yes _____No**
   d. **Education:**_____
   e. **Relevant Experience:**_____
      _____
   f. **Volunteer Time Available:_____weekly**
   g. **Previous appointment to any board for Town or School District? (if yes, please describe:**_____
      _____
   h. **Are you willing to serve as an alternate? _____Yes _____No**
   i. **Are you willing to serve on a sub-committee? _____Yes _____No**

3. **I would like to improve the following:**_____
   _____

4. **I am seeking this appointment because:**_____
   _____

Signature:_____ **Date:**_____

Please return this application to: Town Offices, P.O. Box 660, Barrington, NH 03825 or call 664-9007.