



TOWN OF HOPE MILLS Boards and Committees Application

Applicant Name: _____ Email Address: _____

Address: _____ Zip Code: _____

How long at present address: _____ Name of Neighborhood: _____

Home Phone: _____ Work Phone: _____ Cell Phone _____

Current Employer: _____ Job Title/Occupation: _____

Do you reside within the corporate limits of Hope Mills? Yes no
How long have you been a resident of Hope Mills? _____

List below in priority the Board on which you wish to serve:
First Choice: _____
Second Choice: _____

List any current or past volunteer activities in which you are/were involved.

What do you see as the responsibilities of this board and what do you hope to accomplish if appointed?

Do you have any personal or business interest(s) that could create a conflict of interest (either real or perceived) if you are appointed?
 No Yes If yes, please explain:

By submission of this application, I certify that all of the information contained herein is true to the best of my knowledge, and I understand that this application shall be active for one year. I also understand that I will be required to be available to attend meetings of the Board as assigned.

Signature of Applicant _____ Date _____
***Please note original signature is required in order to be considered. This information along with other material may be used by the Town Board in making appointments and in the event you are appointed, it may be used as a basis for a news release to identify you to the community.**

For Office Use Only: Appointed to _____
Date: _____ Term Expires: _____