

COMMISSION CANDIDATE APPLICATION FORM -TOWN OF MOUNT AIRY

1. BASIC INFORMATION:

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ CELL NUMBER: _____

E-MAIL: _____

DATE: _____

DATE RECEIVED: _____ RECEIVED BY: _____

SIGNATURE: _____

2. COMMISSION INFORMATION:

COMMISSION INTERESTED IN: _____

CAN YOU MAKE MONTHLY MEETINGS? _____

HOW DID YOU LEARN ABOUT THE COMMISSION? _____

3. BACKGROUND:

PRIOR COMMUNITY SERVICE: _____

WORK, EXPERIENCE OR OTHER TRAINING: _____

4. INTEREST AND ISSUES:

WHY INTERESTED: _____

CONCERNS: _____

SPECIFIC ISSUES TO BE ADDRESSED: _____

ADDITIONAL INFORMATION, THOUGHTS AND COMMENTS: _____

PLEASE ATTACH ANY RESUMES TO APPLICATION