



TOWN OF BELVILLE

APPLICATION FOR COMMITTEE APPOINTMENT

Request for appointment to: _____

Name: _____

Street Address: _____

Mailing Address _____

City/State/Zip Code: _____

Telephone: _____ Home () _____

Email Address (if any): _____

How long have you lived in the Belville Area? _____

Volunteer Activities: _____

Why do you wish to serve on the Committee?

What do you feel are your qualifications for serving on the Committee?

What areas of concern would you like to see the Committee address?

Are you currently serving on another board or committee appointed by a municipality or county? No _____ If so, please list:

Please list five (5) references from previous, public or civic activities (if any):



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| Contact name | Address | Phone |
|--------------|---------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Signature: _____ Date: _____

Please return to: Town Clerk
Town of Belville
497 Olde Waterford Way, Suite 205
Belville, NC 28451

Ph: (910) 371-2456
Fax (910) 371-2474