



TOWN OF WALPOLE
SELECT BOARD
APPLICATION TO COMMITTEE

Name_____

Phone#_____

Home Address_____

Email_____

Indicate Committee(s) in which you are interested:

1. _____ 2. _____ 3. _____

Present business affiliation and work _____

Do you have any time constraints that would limit your ability to attend one or two meetings a month?

YES ☐ NO ☐

What type of experience can you offer this Board/Committee?

What type of issues would you like to see this Board/Committee address?

Reason for interest in serving: _____

Please list any Boards, Committees and/or Commissions you currently or have served on:

I agree that if appointed, I will work towards furtherance of the committee's mission statement; and further, I agree that I will conduct my committee activities in a manner, which is compliant with all relevant State and Local laws and regulations.

I hereby submit my application for consideration for appointment to the Board/Committee listed above.

Signature_____

Date_____