

APPLICATION TO SERVE ON  
BOARDS AND COMMITTEES  
TOWN OF BOOTHBAY HARBOR



Last: \_\_\_\_\_ First: \_\_\_\_\_ Initial: \_\_\_\_\_

*Board of Selectmen respectfully requests that all information is thoroughly completed to provide adequate information for full consideration, including when re-applying. Incomplete applications may delay consideration.*

Physical Resident Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Business Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Business Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Education: \_\_\_\_\_

How long have you lived in Boothbay Harbor: \_\_\_\_\_ Years \_\_\_\_\_ Months

Are you a registered voter in Boothbay Harbor? \_\_\_\_\_ Yes \_\_\_\_\_ No

Is this your first application  or are you re-applying?

Indicate the Board(s) and/or Committee(s) you are interested in serving on.

Appeals Board:  Planning Board:

Port Committee:  Budget Committee:

Boothbay Region Refuse District:  Economic Development Committee:

Previous Boothbay Harbor Boards or Committees on which you have served:

\_\_\_\_\_ Years Served: \_\_\_\_\_

\_\_\_\_\_ Years Served: \_\_\_\_\_

\_\_\_\_\_ Years Served: \_\_\_\_\_

When was the last time you attended a meeting of the board for which you applied:

Have you read the committee or Boards' enabling ordinance?

Yes  No

Will you commit to attend at least 75% of the meetings?

Yes  No

Will you commit to take Maine Municipal Association Public Officials Training? (if required)

Yes No

Will you be available to attend the Board of Selectmen's meeting in which your appointment will be discussed?

Yes  No

Other relevant work or volunteer experience: (Please list the organization, address, your position and the dates served.)

Please provide a brief statement indicating why you are interested in serving/or renewing your service on this committee:

STATEMENT OF QUALIFICATIONS:

Please provide a brief statement indicating why you feel you are qualified or what you would like to offer to be considered for the appointment. Attach additional sheets or resume if needed.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_