

City of Bath

Application for Appointment to City Board/Commission/Committee

Full Name: _____

Street Address: _____

Home Tel #: _____ e-mail address _____

I live in Council Ward # _____

I wish to be considered for appointment to the:

(Name of Board/Commission/Committee)

Check one or both:

Full Membership Status _____

Term Begins: _____

and/or

Associate Membership Status _____

Term Expires: _____

Occupation: _____

Employed by: _____

Work Tel #: _____

Why do you want to be a member of this Board/Commission/Committee?

Please note any prior experience, knowledge, or abilities that you have which would contribute to the activities of the Board/Commission/Committee:

Have you ever served on a City Board/Commission/Committee? _____

If so, please list the Board/Commission/Committee and years of service:

Date

Signature

Please return form to: City Clerk's Office, 55 Front Street, Bath, ME 04530