



CITY OF CHERRYVILLE
APPOINTMENT APPLICATION

REQUEST FOR APPOINTMENT TO: _____
(Committee, Board, Commission)

NAME: _____

ADDRESS: _____

PHONE: (home) _____ (work/cell) _____

EMPLOYED BY: _____

JOB TITLE: _____

DUTIES PERFORMED: _____

PROFESSIONAL AND VOLUNTEER ACTIVITIES: _____

WHY DO YOU WISH TO SERVE ON THE BOARD, COMMITTEE, OR COMMISSION:

WHAT AREAS OF CONCERN WOULD YOU LIKE TO SEE THE BOARD, COMMITTEE, OR COMMISSION ADDRESS: _____

REGULAR ATTENDANCE IS VERY IMPORTANT FOR THE BOARD, COMMITTEE OR COMMISSION TO PROPERLY CONDUCT EFFECTIVE MEETINGS. WILL YOU BE ABLE TO CONTRIBUTE SUFFICIENT TIME TO THE SCHEDULED MEETINGS?

SIGNATURE: _____ DATE: _____

RETURN FORM TO: PAIGE GREEN, CITY CLERK
116 S. MOUNTAIN STREET
CHERRYVILLE, NC 28021
704-435-1709 (phone) 704-435-9933 (fax)
pgreen@cityofcherryville.com