

**APPLICATION TO SERVE ON BOARDS
AND COMMITTEES
TOWN OF BAR HARBOR**



Last: _____ First: _____ Initial: _____

Town Council respectfully requests that all information is thoroughly completed to provide adequate information for full consideration, including when re-applying. Incomplete applications may impede consideration.

Physical Resident Address: _____

Mailing Address: _____

Business Address: _____

Business Phone: _____ Home Phone: _____

E-mail Address: _____ FAX Number: _____

How long have you lived in Bar Harbor: _____ Months _____ Years

Occupation:

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: | Design Review Board: | Parks & Recreation: |
| Assessment Review Board: | Hancock County Planning | Parking & Traffic Committee: |
| Conservation Commission: | Commission: | Planning Board: |
| Cruise Ship Committee: | Harbor Committee: | Age Friendly Committee: |
| Communication Technology Task Force: | Housing Authority: | Recycling Task Force: |
| | Marine Resource Committee: | Warrant Committee: |
| | Parking Solutions Task Force: | |

Education:

Previous Bar 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 enabling ordinance? | Yes | No |
| Will you commit to attend at least 75% of the meetings? | Yes | No |
| Will you commit to take the required Ethics Training? | Yes | No |
| Will you be available to attend the Council meeting in which your appointment will be discussed? | Yes | No |
- Other relevant work or volunteer experience: (Please list the Organization, its 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 another sheet if you like.

Signature: _____ Date: _____