



Town of Black Mountain

160 Midland Avenue, Black Mountain, NC 28711

Phone (828) 419-9300 Fax (828) 669-4204

TDD 800-735-2962

www.townofblackmountain.org



The Town of Black Mountain Board of Aldermen have adopted this application for use by individuals interested in appointment to the Town's advisory boards and commissions. To ensure that your application will receive full consideration, please answer all questions **completely**. Incomplete applications will **NOT** be considered. Applications accepted through **Friday April 24, 2020 by 5:00 p.m.** to the Town Clerk.

Return this application either in person, by mail/fax/email to: Town Clerk, Town of Black Mountain, 160 Midland Ave., Black Mountain, NC 28711. townclerk@townofblackmountain.org Fax (828)669-4204

APPLICANT INFORMATION

NAME: _____ DATE: _____

PREFERRED NAME: _____

HOME ADDRESS: _____

MAILING ADDRESS (if different): _____

CITY, STATE and Zip: _____

Do you live inside the town limits of Black Mountain? Yes _____ No _____

EMAIL ADDRESS (*this is mainly how we will communicate with you*): _____

PHONE NUMBER(S): MAIN _____ EMERGENCY _____

ADVISORY BOARD/COMMISSION PREFERENCE

Please list the name of the board or commission to which you are applying or seeking reappointment. (You may apply for more than one, however you must submit a separate application for each board or commission you apply for.) Applicants will only be considered for one board or commission seat.

Board or Commission: _____ Are you seeking re-appointment? Yes _____ No _____

Why do you wish to serve the Town (or continue serving) in this capacity?

If additional space is needed please attach a separate sheet.

EDUCATION & CERTIFICATIONS

Please list your educational background and any certifications you have. Include names of all schools attended.

EXPERIENCE & CIVIC INVOLVEMENT

Please describe any experience you have that would contribute to the purpose of the Board or Commission in which you are applying. Please list the names of all civic organizations in which you currently hold membership.

CERTIFICATE OF APPLICANT

This application is a public record.

I certify that, to the best of my knowledge and belief, the statements given truly represent my background and experience.

Applicant's Signature

Date

Thank you for your interest in appointment to the Town of Black Mountain's Boards and Commissions. Individuals selected for appointment by the Board of Aldermen will assume their position on the date of Board of Aldermen approval and after they are sworn in. The Town Clerk will contact you to make arrangements for swearing in. All Town of Black Mountain Advisory Boards and Commissions must operate by the ethics, policies and laws set forth in the Boards & Commissions Handbook.

The Handbook and additional information may be viewed on the Town's website at www.townofblackmountain.org