

BOARD OF CANVASSERS

CITIZEN APPLICATION

Membership on Board or Commission

Name			
Address			
Telephone #:	(Home)	(Work)	(Fax)
		E-Mail	
Registered Voter? Yes	sNo		
	ve you are suited to provide		
	ooard(s) or commission(s)		
• •	eve you are suited to pr		
help us in making our	this application, offer any decision on the best boardesume or letter of interest t	d or commission to appo	oint you to. Also, you
Thank you for your int	erest in serving your comm	nunity	

Thank you for your interest in serving your community.

This application can be printed.

Kindly mail, fax or drop off application to:

Coventry Town Manager 1670 Flat River Road Coventry, RI 02816

Fax: 401-822-9132

E-mail: jamitrano@coventryri.org