

KCWA

CITIZEN APPLICATION

Membership on Board or Commission

Name			
Address			
Telephone #:	(Home)	(Work)	(Fax)
		E-Mail	
Registered Voter? Yes	No		
Reason why you believe	e you are suited to provide	e service on <i>this</i> particula	ur board or commission
Please note any <i>other</i> be	oard(s) or commission(s)	you may be interested in	serving on:
• •	ve you are suited to pr		•
On the reverse side of thelp us in making our	his application, offer any decision on the best board sume or letter of interest t	other additional informated or commission to appo	ation about yourself to bint you to. Also, you

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