

STORMWATER MANAGEMENT COMMITTEE

CITIZEN APPLICATION

Membership on Board or Commission

Name		
Address		
Telephone #:(Home)	(Work)	(Fax)
	E-Mail	
Registered Voter? YesNo Pol	litical Party Affiliation	
Reason why you believe you are suited to pr	rovide service on <i>this</i> particular	board or commission
Please note any <i>other</i> board(s) or commission		
Reason why you believe you are suited to commission(s):		
On the reverse side of this application, offer help us in making our decision on the best may wish to attach a resume or letter of inte expertise, or interest.	board or commission to appoi	nt you to. Also, you
Thank you for your interest in serving your o	community.	
This application can be printed. Kindly mail, fax or drop off application to:	Coventry Town Manager	

Fax: 401-822-9132 E-mail: jamitrano@coventryri.org

Coventry, RI 02816