

P.O. Box 351 Granite Quarry, NC 28072-0351 704-279-5596 www.granitequarrync.gov

ADVISORY BOARD AND COMMITTEE APPLICATION

NAME	
PHYSICAL ADDRESS	ZIP
MAILING ADDRESS	ZIP
PHONE PHONE (business or	cell)
EMAIL	
OCCUPATION	
ARE YOU CURRENTLY SERVING ON A GRANITE QUARRY BOARD	OR COMMITTEE UYes No
IF SO, PLEASE PROVIDE THE NAME OF THE BOARD OR COMMIT	ГЕЕ
I AM INTERESTED IN SERVING ON THE FOLLOWING ADVISORY F OF PREFERENCE (please number up to three applicable committees)	BOARDS OR COMMITTEES IN ORDER
Community Appearance Commission	Zoning Board of Adjustment
Events Committee	Other
Planning Board	

WORK EXPERIENCE (List your four most recent employment experiences, listing present or most recent first)

Company Name/Location	Position	Job Description
-	Company Name/Location	Company Name/Location Position

EDUCATION (List your three most recent educational experiences, listing present or most recent first).

Educational Institution/School	Degree Received	Area(s) of Study
WHY DO YOU FEEL YOU ARE QUAI	LIFIED FOR THIS APPOINTME	NT?
BOARDS/ COMMITTEES ON WHICH	YOU HAVE SERVED (LIST MUN	CIPALITIES AND DATES
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EVER CONVICTED OF A FELONY	$1 \text{ res} \square 100 \text{ m yes, state details.}$	
By signing this form I acknowledge that to attend meetings at least once a month record and as such, portions may be sub Records. I certify that the facts contained agree that by my submission of this app	n. I affirm that I understand this ap oject to release under North Caroli ed in this application are true and o	ina General Statute Chapter 132, Public correct to the best of my knowledge. I
Signature		
FOR OFFICE USE ONLY		
Application Received:	Meeting Date	e & Time:
Confirmation Date:	Term Ending	: