

APPLICATION FOR BOARDS, COMMITTEES, AND COMMISSIONS TOWN OF DUCK

	FOR OFFICE USE C	ONLY	
Date Received	Time	Contacted by:	
Appointed To	Date Appointed	Application Updated:	
Please Complete Each Section (Print or Type)			
Name			
Home Address			
Mailing Address			
Business Address		_	
Home PhoneBusiness Phone			
Email			
Planning Board Zoning Board of Wall Décor and A	•		
Other (please list	<i>J</i>	<u> </u>	
Education (Including Years of School Completed):			

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Current Employer	
Title/Position	Years in Current Position
Brief Description of Duties:	
Other Employment History	
Interests/Skills/Areas of Expertise	2
Current Professional Organizatio	ns/Civic and/or Activities
Past Professional Organizations/C	Civic and/or Activities
Comments	
Is there any possible conflict of i	interest or other matter that would create problems or prevent you your duties as an appointee of the Town Council?
No	Yes (If yes, please attach an explanation of the possible conflict)
and belief. I understand that this applyears and must be updated after that application will be removed from the aposition that I will be required to atte	I in this application are true and correct to the best of my knowledge lication will be retained in the Office of the Town Clerk for two (2) t time. If not updated as requested by the Town Manager, the ctive consideration file. I understand if I am to be considered for a end a Council meeting to give an introduction to Town Council. I ing this application to the Town of Duck, this application and all record under North Carolina law.
	Signature
	Date
RETURN COMPLETED FORM TO:	Office of the Town Clerk Town of Duck Post Office Box 8369 Duck, NC 27949

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