

**TOWN OF PORTSMOUTH, RI
BOARDS/COMMISSIONS/COMMITTEES
APPLICATION FORM**

Date: _____ **New Appointment:** _____ **Re-Appointment** _____

Board/Commission/Committee Being Applied For: _____

(PLEASE PRINT) NAME: _____

FULL STREET ADDRESS: _____

MAILING ADDRESS (if different): _____

TELEPHONE NUMBERS:

HOME: _____ **BUSINESS:** _____ **CELL:** _____

PRESENT EMPLOYER NAME AND ADDRESS:

LENGTH OF EMPLOYMENT: _____

IF LESS THAN TWO YEARS, PREVIOUS EMPLOYER (Name and address):

EDUCATIONAL BACKGROUND: _____

WORK EXPERIENCE RELATED TO POSITION BEING APPLIED FOR:

**RE-APPOINTMENT MUST INCLUDE DATA ON ATTENDANCE OF
PREVIOUS TERM:** _____

**PROVIDE A BRIEF EXPLANATION OF YOUR INTEREST IN THIS
POSITION:** _____

SIGNATURE OF APPLICANT: _____