



CITY OF AUBURN BOARD & COMMITTEE APPOINTMENT APPLICATION

Please complete this application for consideration to serve on a board or committee of the City of Auburn. Submission of an application does not imply or guarantee an appointment to any board or committee. The City reserves the right to appoint board and committee members as vacancies arise and to perform background checks or any other necessary investigations on applicants. Incomplete applications and those which list more than one committee will not be considered.

Date: _____

Last name: _____ First name: _____ Middle initial: _____

Residence address: _____ Ward: _____

City: _____ State: _____ Zip code: _____

Home phone: _____ Work phone: _____ Cell phone: _____

Email address: _____

Current occupation: _____

Previous occupation (if retired or no longer working): _____

Educational and/or experience (or attach your resume): _____

Please check which Board or Committee you are interested in serving on. Individual applications are required if you wish to apply for more than one Board or Committee.

- | | |
|--|---|
| <input type="checkbox"/> 9-1-1 Committee | <input type="checkbox"/> Airport Board |
| <input type="checkbox"/> Auburn Housing Authority | <input type="checkbox"/> Audit & Procurement Committee |
| <input type="checkbox"/> Board of Assessment Review | <input type="checkbox"/> Cable TV Advisory Board |
| <input type="checkbox"/> CDBG Loan Committee | <input type="checkbox"/> Community Forest Board |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Ethics Panel |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> L/A Transit Committee |
| <input type="checkbox"/> Parks & Recreation Advisory Board | <input type="checkbox"/> Poland-Auburn Economic Development Committee |
| <input type="checkbox"/> Planning Board | <input type="checkbox"/> Sewer District |
| <input type="checkbox"/> Water District | <input type="checkbox"/> Zoning Board of Appeals |

Is this application for a ___ new appointment or ___ reappointment or ___ desire to move from an alternate/associate to full member?

Briefly describe why you want to serve on this committee (please limit to 150 words or less. Please attach additional sheet if needed). _____

What do you hope to accomplish (please limit to 150 words or less. Please attach additional sheet if needed). _____

Are you presently serving on a City or Community Board or Committee? If so, which one(s)? _____

Dates served (if known)? _____

Have you previously served on a City or Community Board or Committee? If so, which one(s)? _____

Dates served (if known)? _____

How did you learn of this vacancy? _____

The City Council strives to promote membership and by practice will attempt to limit the number of boards or committees any one person will serve. The city Council also strives to maintain balance of ward distribution on all boards, commissions, or committees.

Thank you for your interest and willingness to serve our community. The giving of your time is commendable and appreciated. Without people like you coming forward, our community would not be as strong, as vibrant, or as great as it is. On behalf of all of us at the City of Auburn, we hope your volunteer experience is rewarding and we thank you for being an outstanding citizen!

I certify that this information is true to the best of my knowledge and agree to the terms and conditions set forth above.

Signature: _____ Date: _____

Please submit your application to;
Susan Clements-Dallaire, City Clerk
60 Court Street, Auburn, ME 04210
207-333-6601, extension 1126 sdallaire@auburnmaine.gov

FOR OFFICE USE ONLY

DATE APPLICATION RECEIVED: _____
APPOINTMENT DATE: _____
TERM EXPIRATION DATE: _____
OATH DATE: _____