



Application for Board Appointment

Town of Pineville

P.O. Box 249 • Pineville, NC 28134

Fax: 704-889-2293

Name: _____ **Date:** _____

Address: _____ **Home Phone:** _____

Email Address: _____ **Cell Phone:** _____

Please indicate which Board you are interested in: _____

Please explain briefly why you are seeking appointment to this board: _____

Please describe any professional experience you may have that would be relevant to this board:

Please describe any committees, organizations, or other boards you may have participated on or educational background you have that would qualify you for a position on this board: _____

Please tell us anything else about yourself that would be beneficial to this board: _____

Signature: _____ **Date :** _____