

**TOWN OF NORTH KINGSTOWN
PUBLIC SERVICE APPOINTMENT
APPLICATION**

NAME (PLEASE PRINT OR TYPE)

LAST

FIRST

MIDDLE

STREET ADDRESS AND ZIP CODE

MAILING ADDRESS AND ZIP CODE (IF DIFFERENT FROM STREET ADDRESS)

OCCUPATION

HOME TELEPHONE

BUSINESS TELEPHONE

E-MAIL (PRINT CLEARLY)

MAY YOU BE CONTACTED AT YOUR PLACE OF BUSINESS? YES _____ NO _____

COMMISSION, COMMITTEE, BOARD OF INTEREST: (SEE ATTACHED LIST)

Please submit a letter of interest indicating the reasons for seeking appointment to the above commission, committee, or board. Also include education, training, experience, special skills, knowledge, talents, and insights or points of view that you might offer to the commission, committee or board of interest.

HAVE YOU EVER SERVED ON A COMMISSION, COMMITTEE, OR BOARD IN NORTH KINGSTOWN OR ANOTHER MUNICIPALITY OR STATE? IF SO, PLEASE INDICATE.

IS THERE A SPECIFIC EVENING OR OTHER PERIOD OF TIME YOU WOULD BE UNAVAILABLE TO ATTEND MEETINGS? YES _____ NO _____

IF SO, PLEASE INDICATE: _____

ARE YOU A REGISTERED VOTER OF NORTH KINGSTOWN? YES _____ NO _____

DO YOU ANTICIPATE HAVING TO REFRAIN FROM PARTICIPATING IN DISCUSSION AND VOTING ON ANY PARTICULAR MATTER (S) THAT MAY COME BEFORE SAID COMMISSION, COMMITTEE OR BOARD BECAUSE OF CONFLICT OF INTEREST? YES _____ NO _____

IF SO, PLEASE EXPLAIN: _____

PLEASE BE ADVISED THAT APPOINTMENT TO THE ZONING BOARD OF REVIEW, THE PLANNING COMMISSION, AND SEVERAL OTHER BOARDS REQUIRE TIME DURING THE REGULAR WORK DAY TO REVIEW PLANS AND CONDUCT SITE INSPECTIONS. DO YOU UNDERSTAND THE TIME REQUIREMENTS NECESSARY TO SERVE AND ARE YOU ABLE TO MAKE THAT COMMITMENT? _____

APPOINTMENT TO THE FOLLOWING COMMISSIONS, COMMITTEES AND BOARDS REQUIRE THAT A FINANCIAL STATEMENT BE FILED ANNUALLY WITH THE RHODE ISLAND ETHICS COMMISSION:

ASSESSMENT BOARD OF REVIEW
BUILDING CODE BOARD OF APPEALS
HISTORIC DISTRICT COMMISSION
LIBRARY BOARD OF TRUSTEES
PLANNING COMMISSION

POLICE PENSION PLAN COMMITTEE
SEWER APPEALS BOARD
VETERANS MEMORIAL
SCHOLARSHIP FUND COMMITTEE
ZONING BOARD OF REVIEW

NOTE: APPLICATIONS ARE KEPT ON FILE FOR ONE (1) YEAR FROM THE DATE OF RECEIPT.

I HAVE RECEIVED AND UNDERSTAND THE GUIDE TO RHODE ISLAND'S LAWS ON OPEN MEETINGS, THE RHODE ISLAND ETHICS COMMISSION'S FINANCIAL DISCLOSURE REQUIREMENTS, AND THE OVERVIEW OF THE CODE OF ETHICS LAW.

SIGNATURE

DATE

PLEASE RETURN THIS FORM NO LATER THAN 12:00 NOON ON THE WEDNESDAY PRIOR TO THE REGULAR TOWN COUNCIL MEETING OF THE MONTH TO:

**TOWN CLERK'S OFFICE
TOWN HALL
100 FAIRWAY DR
NORTH KINGSTOWN, RI 02852-5762**