

Town of Thompson First Selectman's Office

815 Riverside Drive P.O. Box 899 North Grosvenordale, CT 06255 860-923-9561 (Office) 860-923-9897 (Fax)

Application for Boards, Commissions and Committees

Name:	Date:
Occupa	ation:
Reside	nce Address:
Mailing	Address:
Phone	Number: Home: Cell:
E-Mail	Address:
1. F	How long have you lived in Thompson?
2. A	Are you a registered voter of the Town of Thompson? Yes No
3. V	What is your party affiliation? (Circle one) Republican Democrat Unaffiliated
4. V	Which Board or Commission appointment are you seeking?
5. V	What is your knowledge regarding this Board or Commission?
6. H	Have you attended any meetings of this Board or Commission Yes No
7. F	Have you ever come before or dealt with this Board or Commission Yes No
If	f yes, please explain:
8. V	Nould there be a possible conflict of interest if you were appointed to this Board or Commission?
Y	es No
If	f yes, please explain:
9. Have	e you ever served on a local government Board or Commission in this or any other town?
	Yes No
	If yes, please explain:
10. Boai	rds and Commissions meet a minimum of 12 times per year. Therefore, it is required for all members to be in
attendar	nce to ensure a quorum. Are you able to devote this amount of time? Yes No

Please Return to: First Selectman's Office at the address given above.

The Town of Thompson (the "Town") is an equal opportunity provider and employer, dedicated to a policy of nondiscrimination in employment on any basis prohibited by law. The Town considers applicants for all positions without regard to race, color, national origin, age, disability, sex, gender identity, religion, veteran status, political beliefs, marital status, familial or parental status, sexual orientation, or if all or part of an individual's income is derived from any public assistance program, or protected genetic information. This form has been designed to strictly comply with State and Federal fair employment practice laws prohibiting employment discrimination.