LEWISVILLE
INCORPORATED 1991

APPLICATION FOR LEWISVILLE BOARD/COMMITTEE

Please submit a separate application for each board appointment request.

Full Name: _____

Address: _____

City/State/Zip: _____

Day Phone: _____ **Evening Phone:** _____ **Cell:** _____

Email: _____

I am interested in serving on the following Board (3-year term)**:**

❒ Willow Run Municipal Service District (Area 2 - 1 Vacant Seat)**Must reside in Area 2**

Please attach a brief statement with information detailing why you wish appointment to the board and return to: Town Clerk, Town of Lewisville, PO Box 547, Lewisville, NC 27023 or email townclerk@lewisvillenc.net.

EMPLOYMENT AND EDUCATION

Employer: _____ **Address:** _____ _____ **Phone:** _____ **Email:** _____ **Occupation:** _____	**Graduate? Y/N Major** _____ **High School:** _____ **College:** _____ **Graduate School:** _____ **Other:** _____ _____

Do you currently serve on a board and/or committee? Yes ❒ No _____ **Date:** _____

❒ If so, what board and/or committee:
Are you requesting reappointment? Yes ❒ No ❒

Signature:

FOR OFFICE USE ONLY

Date Received: _____ Interview Date (if applicable): _____
Staff Recommendation: _____
Appointed by Town Council: Yes ❒ No ❒ Appointment Date (if applicable): _____