



ADVISORY BOARD CANDIDATE APPLICATION

The Town of Clayton welcomes and appreciates your interest in serving the Town. This application is designed to gather information to evaluate your qualifications. Candidates may be interviewed prior to appointment.

If requesting consideration for more than one, please submit a separate application for each board.

CHOOSE ONE:

Planning & Zoning Board

Board of Adjustment

Downtown Development Assoc.

Clayton Library Board

Recreation Advisory Committee

Fire Dept. Advisory Board

Public Arts Advisory Board

PLEASE NOTE: In accordance with North Carolina law, this application is a public record and will be disclosed upon request and without notice. If there is any information you do not want released to the public, please do not include it.

Please type or use dark ink.

Name: _____

Mailing Address: _____

Physical HOME Address: _____

Phone Number (HOME): _____ (WORK) _____

FAX Number: _____ Mobile Number: _____

Email Address: _____

*Female *Male

*Race _____

Employer: _____

Occupation: _____

*This information is voluntary and is requested for the sole purpose of assuring that a cross section of the community is appointed; NC GS 143-157.1.

Residency within the Town limits or ETJ (extra territorial jurisdiction) is required for membership on most Council advisory boards.

Length of residence in Clayton: _____

Do you live in the Clayton town limits: Yes No ETJ: Yes No

How did you find out about this board or committee? Facebook Website TV
Newspaper Email Twitter Mail Other _____

Outline your qualifications and why you wish to serve the board/committee you indicated.

State why you would be an asset to this board or committee. _____

Do you anticipate a conflict of interest if asked to serve as a member on the requested board or committee? No Yes If Yes, explain:

PLEASE LIST CURRENT AND PREVIOUS SERVICE TO THE COMMUNITY, CIVIC CLUBS, ETC., ACTIVITY AND ANY SPECIAL TALENTS.

Boards/Committees/Civic	From	To
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature _____ **Date**

- Please do not submit resumes or attachments.
- This application is a **public record**.
- Information in the application will be considered in making appointments.
- Candidates may be interviewed prior to appointment.
- If not initially appointed to serve, this application will remain active until August 1 of the following year.

Applications are to be turned in to the Town Clerk in person (111 East Second Street), by mail (Town of Clayton, PO BOX 879, Clayton, NC 27528) or by email (kmoffett@townofclaytonnc.org)