

TOWNSHIP OF BRIGHTON COMMITTEE APPLICATION

Date: _____ Name: _____ Street Address: _____
E-mail _____ Zip: _____
Telephone No.: (H) _____ (W) _____ (C) _____

1. Are you a resident: YES A registered voter: YES
NO NO
2. Committee(s) in which you are interested: _____
3. Do you have any relatives, business acquaintances associated with the Township, or potential conflicts of interest within the duties of this committee? YES / NO (If yes, please state name and relationship.)

4. Total years resided in Township: _____
5. Employer: _____ Number of years: _____
Address: _____
Your position or job title: _____
6. High School: _____
7. College(s) and/or Technical School(s) summary (include locations, dates, degrees or licenses held):

8. Experience and/or expertise that will assist in meeting the charge of this committee:

9. Hobbies and/or other interests:

10. Any other comments that you wish to make:

The above information is true and correct. Any potential conflict of interest that I am aware of has been declared in item # 3 above.

Signature: _____ Date: _____

TWP USE: Forwarded to Supervisor: _____ Board: _____
Appointed: _____ Term Expires: _____