

TOWN OF BARRINGTON, RHODE ISLAND

This form will be used by any person interested in serving on the various committees of the Town.

Boards and Commissions Application

Name: _____

Address: Home: _____

Business: _____

Email address: _____

Telephone No.: Home: _____ Office: _____

VOLUNTEERING SERVICES TO: _____

Name of Committee

EDUCATION: School City, State Degree
High School: _____

College: _____

Other: _____

EMPLOYMENT HISTORY: (list most recent employment first),

Name of Company City, State Type of Work

Have you ever served, on a committee in Barrington? _____

In another community? _____ Please list: _____

Other volunteer experience (name of organization, position):

How long have you resided in Barrington? _____

Previous address: _____

Please explain briefly your reason(s) for applying for an appointment to this particular committee:

What special talents and experience do you possess which would be useful to the committee?

Would you be representing any organization? _____

If yes, which one? _____

THE TOWN OF BARRINGTON DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, SEX, RELIGION, AGE OR DISABILITY IN THE EMPLOYMENT OR PROVISION OF SERVICES.

Please be advised that pursuant to Chapter 2 of Title 38 of the Rhode Island General Laws, all the information provided by you to the town in connection with your application for an appointment to a town board/committee is deemed a Public Record subject to disclosure to any person who requests the same.

Applicant's Signature: _____

Date: _____

RETURN THIS FORM TO: TOWN CLERK
TOWN HALL, 283 COUNTY ROAD
BARRINGTON, RI 02806